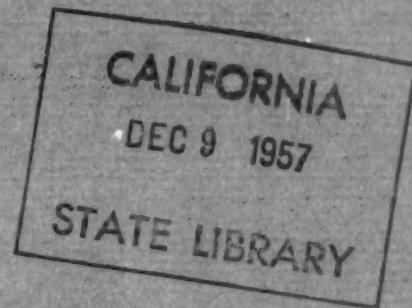


Rehabilitation Literature

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The publications indexed in this issue have been added to the loan collection of the Library, which extends its loan services to organizations and individuals whose local resources are so limited as to make information otherwise unavailable.

Selected Abstracts of Current Publications of Interest to Workers with the Handicapped

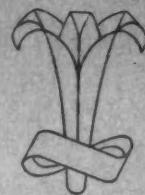
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• Now in the 36th Year of Service

The NATIONAL SOCIETY

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CRIPPLED CHILDREN *and* ADULTS

Founded in 1921, the National Society for Crippled Children and Adults, the Easter Seal Society, is a nationwide federation of fifty-two state and territorial societies dedicated to the purpose of helping crippled children and adults. This objective is implemented through a three-fold program:

Education of the public as a whole, of professional persons concerned with the care and treatment of the crippled, of the families of the crippled, particularly parents, and of volunteers and employers.

Research to provide increased knowledge of the causes and prevention of crippling, and of improved methods of care, education and treatment of crippled children and adults.

Direct services to improve the health, welfare, education, recreation and employment opportunities for the crippled, toward the goal of rehabilitation.

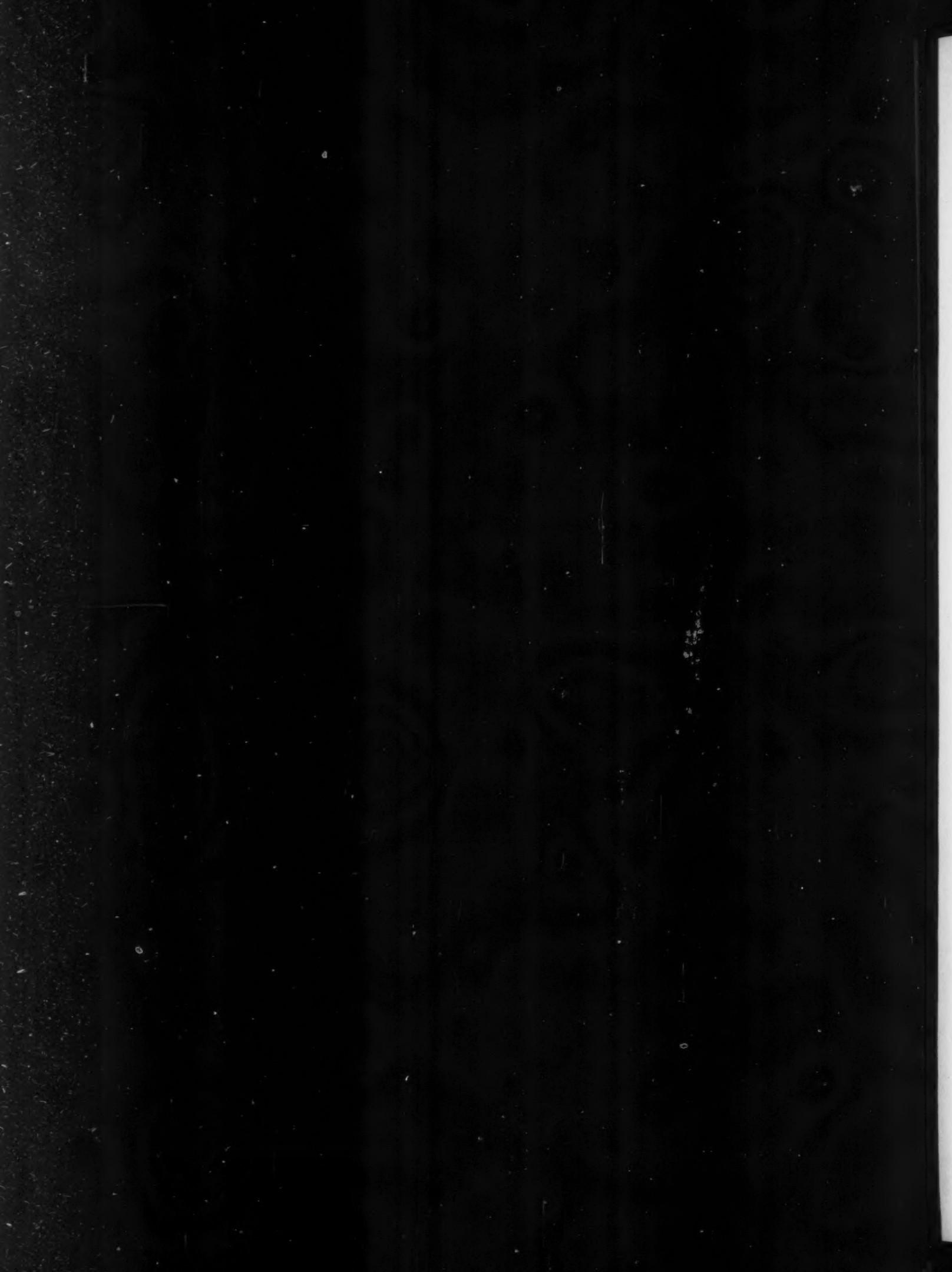
IMMEDIATE PROGRAM AND SERVICES

Services are determined by unmet needs, existing facilities, resources of the Society

and availability of trained personnel and include case finding, diagnostic clinics, medical care, physical, occupational, and speech therapy, treatment centers, rehabilitation centers and curative workshops, mobile clinics, special education, social service, psychological services, sheltered workshops and homebound employment, promotion of employment opportunities for the crippled, recreation, and provision of equipment and prosthetic devices.

The National headquarters provides professional consultation in program planning and community organization to state and local member societies. It maintains liaison with medical specialty groups, offers legislative guidance, a nationwide lending library devoted to literature on handicapping conditions, and a free national personnel registry and employment service which recruits and refers professional workers. It also has an active program of professional education, including scholarships and fellowships, summer workshops for training of professional personnel, exhibits at professional meetings and the publication and distribution of printed materials.





The monthly issues of this abstracting bulletin serve as a supplement to the reference book Rehabilitation Literature 1950-1955, compiled by Graham and Mullen and published in 1956 by McGraw-Hill, New York.

AMPUTATION

1234. Bechtol, Charles O.

Industrial amputee rehabilitation; a presentation of the factors involved in returning the amputee to work. Boston, Liberty Mutual Insurance Co. (1957). 50 p. illus.

A booklet briefly summarizing the present concept of amputee treatment and rehabilitation, especially as it relates to industrial injuries. It outlines factors in the successful rehabilitation of the amputee; aspects in prescribing the prosthesis; points to be considered in surgery, post-operative care and psychological adjustment; features of various types of prostheses and training in their use. One section is devoted to the amputee's problems on returning home and resuming work, as well as follow-up care. The booklet represents a practical, integrated program for amputees, with emphasis on the team aspects of successful rehabilitation.

Available from Charles O. Bechtol, M.D., 789 Howard Ave., New Haven 4, Conn.

1235. Great Britain, Ministry of Health

The rehabilitation of amputees; general principles drawn up by a Subcommittee of the Brussels Treaty Organization (now the Western European Union). London, H.M. Stationery Off., 1957. 20 p. illus.

In this memorandum of The Working Party on Artificial Limbs of the Brussels Treaty Organization, broad general principles which should be followed in rehabilitation of the amputee are discussed as regards special services provided by the physician, nurse, physical therapist, and instructors giving training in the use of prostheses. Postoperative treatment is considered in some detail. Appendixes cover general remedial and walking training exercises; surgical technique of amputation, with optimum sites and maximum and minimum lengths of stumps; appliances; and a suggestion for the establishment of national research facilities.

Available in the U.S. from British Information Services, 45 Rockefeller Plaza, New York 20, N.Y., at 50¢ a copy.

AMPUTATION--EQUIPMENT

1236. Hutter, Charles G. (6253 Hollywood Blvd., Los Angeles 2, Calif.)

A suction socket prosthesis without suction. Orthopedic & Prosthetic Appliance J. Sept., 1957. 11:3:39-43.

A report on a contoured socket with an opening in the front and back, allowing the muscle tissue of the thigh to extend out in the open areas. Experience of a male amputee who has used the socket has been so satisfactory that he has been able to run, play basketball and touch football without any circulatory complications or cramping of the muscles of the stump. Edema of the end of the stump did not develop. A young amputee who is a professional dancing instructor is able to perform complicated dance routines in spite of her amputation. The report represents

AMPUTATION--EQUIPMENT (continued)

an adequate trial of the prosthesis by 25 persons who have been fitted with it and, in some cases, used it for more than a year.

AMPUTATION--PROGRAMS

1237. Tosberg, William A. (Prosthetics Center, N. Y. Univ.-Bellevue Med. Center, New York, N. Y.)

Amputee rehabilitation in the Orient; report of a world tour. Orthopedic & Prosthetic Appliance J. Sept., 1957. 11:3:103-113.

A report on rehabilitation efforts in behalf of the amputee in Japan, Korea, Burma, India, Lebanon, Jordan, Germany, and Denmark. The writer was appointed by the Technical Assistance Administration of the United Nations to conduct a training course for Japanese prosthetists, following which he visited prosthetic centers in other countries.

APHASIA--DIAGNOSIS

1238. Schuell, Hildred (V. A. Hosp., 54th St. & 48th Ave., S., Minneapolis 17, Minn.)

A short examination for aphasia. Neurology. Sept., 1957. 7:9:625-634.

Purpose of this paper is to present a practical method of examining and classifying aphasic patients, by means of which physicians may determine the cerebral processes involved, the recovery which may be expected, and recommendations which should be made for treatment. Consisting of four parts for testing auditory, visual, speech and language, and visual and writing disturbances, the test requires, for most aphasic patients, only 30 to 35 minutes. Each section has no more than 4 tests and, in many cases, these need not all be given. Diagnostic criteria, differential diagnosis, prognosis, and recommendations for each section are discussed and examination procedures are explained.

ARCHITECTURE (DOMESTIC)

1239. U. S. Federal Housing Administration (Washington 25, D.C.)

Report of Industry Advisory Committee on Housing for the Elderly. Washington, D.C., Federal Housing Admin., 1957. various paging. tabs.

Because of liberalized terms under which the Federal Housing Administration could insure financing for the housing of elderly persons (60 years or over), the Industry Advisory Committee, composed of operating heads or administrators of non-profit institutions housing elderly people, met with FHA personnel to devise standards for this type of housing. Discussed were: problems concerned with location of site, public transportation, type of building, number of residents, availability of private rooms, architectural details, and type of services and care provided. A variety of existing housing facilities were described in more detail, as to physical plant, services, admission requirements, and characteristics of residents, with a breakdown of operational costs.

ARTHRITIS--MEDICAL TREATMENT

1240. Smith, Richard T. (330 S. Ninth St., Philadelphia 7, Pa.)

Drugs for the improvement of neuromuscular coordination. J. Am. Geriatrics Soc. Feb., 1957. 5:2:152-162. Reprint.

ARTHRITIS--MEDICAL TREATMENT (continued)

Discusses the search made for a preparation capable of inducing muscle relaxation in fibrositis and lists a number of oral medications combining mephenesin with other constituents (trade names given) which are currently available to the medical profession and recommended as excellent. These drugs are evaluated for their usefulness but meprobamate and zoxazolamine are the author's choice as the newest and best muscle relaxants for use in this type of therapy. Method of administration and selection of patients for trial comparison of both drugs' effectiveness are described, as well as results, toxic effects, and the choice of drugs for the individual patient.

See also 1270.

AUDIO-VISUAL AIDS--DIRECTORIES

1241. U. S. Library of Congress

Film reference guide for medical and allied sciences, by the Inter-departmental Committee on Medical Training Aids. Washington, D.C., The Library, 1957. 147 p. (June, 1957)

The current listing of selected films and filmstrips of use in the medical programs of the member agencies of the Interdepartmental Committee on Medical Training Aids and available for borrowing or rental only. No films which are for sale only have been included. In addition to the main alphabetical listing by title, the guide contains an alphabetical list of distributors, with addresses, and an alphabetical subject index. Each entry includes a summary of the information content of the film or filmstrip, in addition to the usual bibliographic information on films. The guide is issued semiannually, the current issue replacing any previously published.

Available from Library of Congress, Card Division, Washington 25, D.C., at 60¢ a copy.

BLIND--ASSOCIATIONS

1242. Wagner, Robert

"Right to organize," greeting card mailings major themes of Federation New Orleans meeting. New Outlook for the Blind. Sept., 1957. 51:7:316-323.

Written specially for New Outlook for the Blind by a staff writer of the Times-Picayune, New Orleans, this article reports discussions and addresses made at the annual convention of the National Federation for the Blind. Dr. Jacobus tenBroek spoke on the goals sought by the Federation through legislation, namely the Kennedy Bill; the right of blind persons to organize in their own behalf; and the unwarranted attacks made upon the Federation by many agencies for the blind, using federal funds. Bernard Gerchen of Federated Industries reported results of the greeting card program which was described not as a fund-raising device in the usual sense but as, essentially, a merchandising program.

BLIND--EMPLOYMENT

See 1243; 1338.

BLIND--PROGRAMS

1243. American Foundation for the Blind (15 W. 16th St., New York 11, N.Y.)

The Middletown Lighthouse for the Blind; a survey. New York, The Foundation, 1957.. 52 p.. (Studies in community planning: I); 65¢.

In this new series of monographs which the American Foundation for the Blind is issuing, findings of community surveys are utilized to disseminate more widely the knowledge and findings without revealing the often confidential nature of particular studies. Names, localities and statistics have been disguised, they state, to fit a number of communities rather than a specific one. This first booklet is the study of a workshop for the blind which offers training and residential facilities for its clients. The wisdom of providing "boarding houses" in connection with workshop facilities has been questioned; this is a frank appraisal of such a situation. Recommendations are made for utilizing the present facilities to establish a productive workshop. Qualifications for professional personnel required in such a facility are described, as well as administrative aspects of a workshop for the blind.

BLIND--RECREATION

See 1245.

BLIND--SPECIAL EDUCATION

1244. Kloss, Alton G. (Western Pennsylvania School for the Blind, Bayard at Bellefield St., Pittsburgh 13, Pa.)

Relationship between schools for the blind and agencies for the adult blind. Internatl. J. Educ. of the Blind. Oct., 1957. 7:1:1-8.

Reprinted from: The Seer. Dec., 1956.

In this paper presented at the 1956 conference of the Pennsylvania Assn. for the Blind, Dr. Kloss discussed several areas in which more effective cooperation between schools for the blind and agencies for adult blind could improve services, resulting in better adjustment of **blind** children as they reach adulthood. His philosophy of education for blind children is a vital, realistic one, aimed at preparing the child to live in a democratic society as a productive member of the community. Cooperative vocational guidance between schools and agencies is emphasized.

BOY SCOUTS

1245. Young, Charles R. (Texas School for the Blind, W. 45th St., Austin, Tex.)

Scouting in residential schools for the blind. Internatl. J. Educ. of the Blind. Oct., 1957. 7:1:22-25.

A report of a survey of Scouting programs in residential schools for the blind in the United States and Hawaii. Findings revealed Scouting programs in these institutions have been operating for more than 40 years but it was determined that no one type of program could best serve the needs of all residential schools. Quantity, quality, and training for leadership seemed to determine the success of such programs. Recommendations are offered for the improvement of Scouting programs for the blind.

BRACES

1246. Covalt, Donald A. (400 E. 34th St., New York 16, N.Y.)

Bracing for the paraplegic patient, by Donald A. Covalt and John Retzler. Orthopedic & Prosthetic Appliance J. Sept., 1957. 11:3:33-36.

An article reflecting bracing experience at the Institute of Physical Medicine and Rehabilitation, New York City, and describing the prescription, construction, and fitting of braces in paraplegic patients presenting various levels of paralysis.

BRAIN INJURIES

1247. Schwade, Edward D. (324 E. Wisconsin Ave., Milwaukee, Wis.)

Problems in diagnosis and management of the brain-injured child, by Edward D. Schwade and Jean P. Davis. Wis. Med. J. Sept., 1957. 56:9:375-380.

Because the authors believe that physicians should accept wider responsibility in the management of the brain-injured child, they have prepared this brief account of the characteristics of these children; neurological signs and symptoms suggestive of brain injury; ancillary procedures useful in examination of children with suspected brain injury; over-all treatment; and drugs useful in relieving tension and controlling seizures. Advice to parents by physicians and the special educational facilities usually available in the community are also discussed. A multi-disciplined approach to the problems presented by these children is necessary.

CANCER

1248. Diamond, Henry D. (444 E. 68th St., New York, N.Y.)

Hodgkin's disease; neurologic sequelae. Mo. Med. Oct., 1957. 54:10: 945-956.

A preliminary analysis of the total experience of the author and others at the Memorial Center for Cancer and Allied Diseases, New York City, with patients having Hodgkin's disease. Records cover a period of many years and are from the Center's files, as well as the private practice files of the author and Dr. Lloyd F. Craver. A study was made of incidence, pathogenesis, diagnosis, and treatment of neurologic sequelae of patients with histologically proved Hodgkin's disease. End results of treatment of various sequelae are discussed. A bibliography of 111 references is included.

See also 1276; 1303.

CEREBRAL PALSY

1249. Allen, D.

Cerebral palsy. Physiotherapy. Sept., 1957. 43:9:267-269.

Presents briefly the impressions of a British observer of cerebral palsy treatment in the United States, in regard to surgery, bracing, muscle education (includes a discussion of the Bobath method and its use in the United States), and aspects of the programs in this country that are not stressed so much in Great Britain.

See also 1354.

CEREBRAL PALSY--ETIOLOGY

1250. Skatvedt, Marit (Dr. Morley, 210 Buena Vista, Ann Arbor, Mich.)

Cerebral palsied monozygous twins, by Marit Skatvedt and D. E. Morley. J. Speech and Hear. Disorders. Sept., 1957. 22:3:343-347. Reprint.

A case report of identical twins showing malformations of the central nervous system. Results of a variety of clinical examinations are discussed. Family history appeared to be essentially normal and heredity was seemingly non-contributory to the cerebral palsy involvement, similar in each child but differing in degree. Marked prematurity with extreme low birth weight cannot be overlooked as a cause of their cerebral palsy. The mirroring observed in the twins should not be considered as a concomitant of brain damage, the authors believe, but as a natural characteristic of this pair of monozygous twins.

CEREBRAL PALSY--MEDICAL TREATMENT

1251. Kingsley, Daniel M. (530 De Soto St., Alexandria, La.)

Surgical treatment in cerebral palsy. J. La. State Med. Soc. Sept., 1957. 109:9:325-328.

Successful results of orthopedic surgery in cerebral palsy during the past four or five years have advanced the number of indications for surgery to a marked extent. While surgical treatment in cerebral palsy is not a cure-all, Dr. Kingsley believes it is important in that it can often enable patients to perform daily living activities and even find employment. In some cases patients confined to wheelchairs have been able to ambulate after surgery to the lower extremities. Tentative conclusions on a variety of procedures are discussed. After all other modalities of treatment have been tried in the rehabilitation of these patients, surgery is able to salvage a relatively small percentage where other methods have failed. The writer adds a note of caution, however, stressing that improvement, to a degree compatible with self-sufficiency outside of a sheltered environment, is rarely attained.

1252. Silver, Carroll M. (225 Waterman St., Providence, R.I.)

Operative treatment of cerebral palsy involving the lower extremities, by Carroll M. Silver and Stanley D. Simon. J. Internat'l. Coll. Surgeons. Apr., 1957. 27:4:457-464. Reprint.

In a study of 250 children with cerebral palsy treated at the Meeting Street School, Providence, R.I., over an 8-year period, 57 (23 per cent) were operated on, a total of 177 operative procedures being performed on the lower extremities. An analysis of data is presented, with a brief discussion of age at operation, time in hospital, mental status, types of operations performed on the hip, knee, ankle and foot. Results are evaluated. The authors emphasize that surgical treatment is only one facet of the comprehensive treatment of cerebral palsied children and that surgical intervention is never considered until diagnostic studies are complete and sufficient follow-up data available to justify an attempt to arrive at a prognosis.

CEREBRAL PALSY--SPECIAL EDUCATION

1253. Porter, Van C.

The cerebral palsied deaf pupil. Am. Annals of the Deaf. Sept., 1957. 102:4:359-363.

A report of a survey to determine the number of cerebral palsied deaf children in the United States and the provisions being made for their care and education. Questionnaires were sent to 99 schools and classes for the crippled, 92 teachers from these schools, to the directors of 66 schools and classes for the deaf or hard of hearing, and 100 teachers from these schools. The problems encountered in the education of these dual handicapped pupils are evidence of needed research and special education for these pupils as a group.

CEREBRAL PALSY--SPEECH CORRECTION--BIBLIOGRAPHY

1254. Mecham, Merlin J. (Dept. of Speech, Brigham Young Univ., Provo, Utah)

Bibliography of publications on speech and hearing in cerebral palsy.

J. Speech and Hear. Disorders. Sept., 1957. 22:3:348-355. Reprint.

The author indicates this bibliography is the result of a survey of published materials from 1933 to 1956; while not exhaustive, it can serve as a comprehensive reference guide to students and professional personnel interested in the speech problems of the cerebral palsied. Entries are classified under: speech problems, hearing problems, breathing problems, habilitation procedures, problems of professional preparation in speech and hearing, and the relationship of this field to other professions. A separate category lists books and chapters of books dealing mainly with speech and hearing in cerebral palsy. Entries are not annotated.

CEREBRAL PALSY--STATISTICS

1255. Kurland, Leonard T. (Natl. Institute of Neurological Diseases and Blindness, Epidemiology Branch, Bethesda, Md.)

Definitions of cerebral palsy and their role in epidemiologic research. Neurology. Sept., 1957. 7:9:641-654.

Because the incidence of cerebral palsy in the resident population of Rochester, Minn., described in this paper, was found to be appreciably less than that reported in other statistical surveys in the United States, it was felt that a review of the definitions of cerebral palsy was necessary in the light of present epidemiologic concepts. Methods of various surveys and the definitions upon which they were based are discussed, including the Rochester survey. Implications for research in cerebral palsy are indicated. Bibliography of 37 references.

CEREBRAL THROMBOSIS

See 1275.

CHILDREN--GROWTH AND DEVELOPMENT

See 1355.

CHRONIC DISEASE

See 1277; 1329; 1348.

CHRONIC DISEASE--SURVEYS

1256. Krueger, Dean E. (Columbia Univ. School of Public Health, New York 27, N. Y.)

Measurement of prevalence of chronic disease by household interviews and clinical evaluations. Am. J. Public Health. Aug., 1957. 47:8:953-960. Reprint.

In spite of numerous surveys employing lay interviews of one or more members of a household, the author offers his reasons for believing that this method for determining prevalence of diagnosable chronic disease is not currently, or likely to become, a valuable tool. Clinical examinations would, in his opinion, probably produce more nearly accurate, complete, and specific data on the prevalence of chronic disease as opposed to prevalence of disability. Though improvements in content and techniques of interviewing are possible, the reliability of lay interviews is subjected to too many variables. This article is a partial report on a comparison of the two methods, carried out in a Commission on Chronic Illness study.

See also 1302; 1357.

COLOSTOMY

See 1319.

CONVALESCENCE

1257. Moss, N. Henry (36th and Spruce Sts., Philadelphia, Pa.)

Surgical convalescence; when does it end?, by N. Henry Moss, Cletus W. Schwegman, and F. Curtis Dohan. J. Am. Med. Assn. Sept. 28, 1957. 165:4:322-326.

A report of a questionnaire survey of surgeons, industrial physicians, and general practitioners in the U.S., requesting current opinion in regard to the proper time for an individual to return to work after certain selected operations of limited magnitude. Results of the questionnaire show a wide variation in opinion among all physician groups for each of the surgical procedures studied. Physician opinion is demonstrated as the major factor for unnecessarily prolonged surgical convalescence. Evidence indicates that the average length of uncomplicated surgical convalescence can be reduced considerably; recent experiences of the Air Force indicate the individual can be returned safely to full activity after a shorter period of surgical convalescence than is the current practice among the majority of physicians.

1258. Van Horn, A. L. (Kate Macy Ladd Convalescent Home, Far Hills, N.J.)

Newer concepts in convalescent care. J. Natl. Med. Assn. Sept., 1957. 49:5:305-309.

A review of community facilities designed to meet the needs of convalescent patients and the type of comprehensive professional services which could be made available in the convalescent hospital. Such a program is in effect at the Kate Macy Ladd Convalescent Home which the author directs and describes here. Intelligent community planning for convalescent care in relation to community needs and resources is a necessity.

DEAF

1259. Anthony, W. P. (705 - 5th Ave., Ft. Worth 4, Tex.)

Rehabilitation of the nerve deaf patient; the binaural-time-delay stimulus, by W. P. Anthony and Donald C. Gasaway. Laryngoscope. Apr., 1957. 67:4:371-373. Reprint.

Reports observations of an interesting phenomenon in respect to rehabilitation of the nerve deaf patient, one which could prove to be of unlimited value. When employing the time-delayed stimulus, achieved by using two separate systems of sound amplification with one sound source and varying the time relationship of the output of one receiver to the other by 1/400 to 1/25 of a second, the intensity can vary and there is little or no evidence of distortion. Application of this principle to patients with perceptive losses in which the high-frequencies are the most severely affected is obvious, the authors state.

DEAF--LIP READING

1260. Wright, Betty C., ed.

Look, listen and lipread; material for lipreading practice contributed by 37 outstanding teachers of lipreading. Washington, D.C., Volta Bureau, c1957. 110 p. Paperbound.

Because lipreading practice material published by the Volta Bureau between 1934 and 1948 is out of print, this selection of games, drills, stories, and exercises for training the eye and ear to work together is issued in response to numerous requests. Suitable for use with adults and high school seniors, singly or in groups, the material is arranged in the order of its difficulty, proceeding from the familiar to the unfamiliar. Suggestions regarding use of the material have been included with some of the selections; these will be especially helpful to the untrained person who practices with the lipreader. Originally planned for classroom work, the book for the most part can be used just as effectively with the individual. The editor of this publication is well qualified in this field as a teacher of lipreading and a consultant to the American Hearing Society and the U.S. Office of Vocational Rehabilitation.

Available from Volta Bureau, 1537 35th St., N.W., Washington 7, D.C., at \$3.87 a copy.

DEAF--MEDICAL TREATMENT

1261. Lieberman, Alfred T. (29 E. Mt. Vernon Pl., Baltimore 2, Md.)

The surgical treatment of deafness. J. Internat'l. Coll. Surgeons. June, 1957. 27:6:742-751. Reprint.

Briefly traces the historical background of the treatment of otic disease from ancient times to the present day and discusses more in detail modern concepts of the surgical treatment of deafness, which is applicable only to patients in whom disturbance of the sound-conducting apparatus is the sole or major cause of hearing loss. Major pathologic states producing conduction deafness amenable to surgery are listed, as well as the surgical procedures employed in their treatment.

DEAF--PSYCHOLOGICAL TESTS

1262. Bindon, D. Marjorie (Canterbury Univ. College, Christchurch, N. Zealand)

Make-A-Picture Story (MAPS) Test findings for rubella deaf children. J. Abnorm. and Soc. Psych. July, 1957. 55:1:38-42.

A report of an investigation to test the general hypothesis that rubella deaf children and nonrubella deaf children (those born deaf through other causes than maternal rubella or who have become deaf before the age of two) differ from hearing children in personality characteristics. Results for both deaf groups were similar; however, the rubella deaf as compared with the nondeaf, scored fewer "normal" and more "schizophrenic" signs. Comparison of the deaf as a whole (both groups) revealed that the above signs could also distinguish them from the non-deaf population. The author contends that fantasy productions of the deaf, in general, are indicative of their social isolation and illogical unrealistic thinking.

This paper is based on part of a thesis for the M. A. degree in Psychology, University of New Zealand.

1263. Stunkel, Eva Russell (5405 Ninth St., N.W., Washington 11, D.C.)

The performance of deaf and hearing college students on verbal and nonverbal intelligence tests. Am. Annals of the Deaf. Sept., 1957. 102:4:342-355.

The author, a psychologist on the staff of the Test Development Section, U.S. Civil Service Commission, reports on a study to examine and improve procedures for testing deaf persons for the Federal-Service Entrance Examination, a general learning ability test consisting of verbal, arithmetic, and abstract reasoning questions. Comparisons of performance of deaf and hearing college students indicated the deaf have above average ability on nonverbal reasoning tests and marked weakness in handling verbal tests included in this study. Findings and recommendations for future research in the area of job analyses in terms of the deaf person's ability are discussed.

DEAF--SPECIAL EDUCATION

1264. Streng, Alice (1413 E. Courtland Pl., Milwaukee 11, Wis.)

Curriculum in schools for the deaf. Volta Rev. Sept., 1957. 59:7: 291-296.

A report on a questionnaire survey sent to principals of 75 public and private residential schools, as well as day schools and classes for deaf children in the United States and Canada, in regard to the philosophy of education upon which their respective curricula were based. Three statements, reflecting concepts of what the curriculum should encompass, were submitted and each type is discussed here. The author favors the experience-centered curriculum for deaf children in contrast to the broad-fields subject-centered approach which seemed to be dominant in most of the schools reporting. A list of 26 questions to be answered in curriculum research in this field are included.

See also 1253; 1356.

DENTAL SERVICE

See 1344.

DRUG THERAPY

1265. Pallister, Philip D. (Montana State Training School, Boulder, Mont.)

Effects of Serpasil in small dosage on behavior, intelligence and physiology, by Philip D. Pallister and R. Robert Stevens. Am. J. Mental Deficiency. Sept., 1957. 62:2:267-274.

A report of an investigation of the effects of Serpasil on the behavior of the mentally retarded at the Montana State Training School over a 12-month period. It was found that 0.1 mgm. daily of Elixir of Serpasil adequately controlled behavior in the agitated and lower grade mentally retarded without danger of hypotensive shock, mental disturbance, edema, cardiac disorders, or loss of appetite. A definite weight increase was associated with this dosage. Serpasil in small doses had no effect on intellectual ability. Mode of action, clinical effects, and toxic or side effects of the drug as reported in the literature are discussed.

1266. Teicher, Joseph D. (1408 N. Vermont Ave., Los Angeles, Calif.)

The new drugs and the child. Med. Times. Sept., 1957. 85:9:1020-1026.

An evaluation of the new tranquilizing or ataractic drugs for the relief of disturbing symptoms in children, the difference in response to drugs as seen in children and adults, and the harmful effects of administering this type of drug improperly. Used as an aid in the treatment of emotional ills, the drugs can result in improvement of performance so that the child becomes more amenable to the diagnosis and treatment of underlying causes.

See also 1240; 1269; 1282; 1283; 1284; 1285; 1286.

EDUCATION--STATISTICS

1267. U.S. Office of Education

Statistical summary of education, 1953-54. Washington, D.C., Gov't. Print. Off., 1957. 86 p. tabs. (Biennial survey of education in the United States, 1952-54. Chapter I)

This chapter of the "Biennial Survey of Education, 1952-54" provides an abstract of the principal data and interpretations of the individual chapters which are printed separately as soon as completed. It gives first a summary of basic statistics in education from kindergarten through university level; a statistical summary by level (elementary-secondary-higher education); a summary of Negro education; and finally more comprehensive statistics on international education (student and teacher exchange), and activities of the Office of Education in the field of international educational relations. Data cover both public and privately controlled schools. Educational trends over long periods of time are reflected in the historical tables. Statistics on special education for 1952-1953 are briefly summarized.

Available from U.S. Superintendent of Documents, Government Printing Office, Washington 25, D.C., at 35¢ a copy.

EMPLOYMENT (INDUSTRIAL)--PLACEMENT

1268. Employment Security Rev. Sept., 1957. 24:9.

Title of issue: Teamwork in serving the handicapped.

Contents: Placing the emotionally handicapped veteran, Donald S. Donnelly and Stanley C. Wollaston. -Use of a simulated work environment in vocational rehabilitation, Simon B. Friedman and Walter S. Neff. -Rehabilitation; a community project, George F. Dodgen, Jr. -Cooperation; the persistent kind, Cyrus G. Flanders. -That crucial "second look," James H. Sears and Edward J. Buckley. -Jobs for the physically handicapped, Paul P. Connole and John J. Griffin. -Employment of the handicapped; a community responsibility, Peter D. Kristich. -ES and DVR take a "look-see" at relationships, John E. Hay. -Illinois analyzes its handicapped applications, Robert L. Lyons. -Winning poster becomes national billboard, Louise P. Thompson. -Social Security disability benefits and referrals, Victor Christgau. -Unemployment insurance and the handicapped worker, Josephine M. Urani and Joseph H. Barker. -Personnel in work for the blind, Margaret L. Plunkett. -Migrant worker transport regulations, Ernest G. Cox. -What is past is prologue: You ain't see nothin' yet, Clyde W. Gleason.

This issue of Employment Security Review is annually devoted to discussions of the handicapped and their employment problems. Single copies are available from U.S. Superintendent of Documents, Washington 25, D.C., at 20¢ a copy.

EPILEPSY--MEDICAL TREATMENT

1269. Livingston, Samuel (Dept. of Pediatrics, Johns Hopkins Univ. Med. School, Baltimore 5, Md.)

Meprobamate in the treatment of epilepsy of children, by Samuel Livingston and Lydia Pauli. A. M. A. J. Diseases of Children. Sept., 1957. 94:3:277-281.

A report on the treatment, with meprobamate, of 128 epileptic children, 59 per cent of whom also manifested hyperactive behavior disorders. Duration of treatment ranged from 9 months to 2 years. Maximum dosage of one or more other anticonvulsants, administered for 6 months or more, had previously failed to control seizures. Results obtained from meprobamate in this study and those reported in studies of others in the field indicate that the drug is of some worth in the treatment of minor motor seizures. Patients with major motor, petit mal, or psychomotor seizures were not significantly relieved. The tranquilizing action of the drug on emotional reactions is a valuable aid in alleviating hyperactivity and allied behavior problems. Another advantage of meprobamate is the apparently complete freedom from untoward side-actions. Results in this series are analyzed.

GOUT

1270. Robinson, William D. (1313 E. Ann St., Ann Arbor, Mich.)

Current status of the treatment of gout. J. Am. Med. Assn. Aug. 10, 1957. 164:15:1670-1674. Reprint.

Report to the Council on Drugs, Am. Medical Assn.

Factors in correctly diagnosing gout are discussed briefly, and therapeutic measures for the relief of this form of joint disease in its various

GOUT (continued)

stages are evaluated for their effectiveness and certain contraindications. Preventive measures to decrease the frequency of recurrent acute attacks and to prevent or treat deformities or disabilities of chronic tophaceous gout are emphasized. Experience with the various drugs reflects the work of the Rackham Arthritis Research Unit, University of Michigan.

HANDICAPPED--BIBLIOGRAPHY

1271. Busby, Dorothy R., comp.

New horizons; readable books about the physically handicapped. Chicago, American Library Assn. (1957). 9 p. Mimeo.

A cumulated listing of books containing titles which appeared in three separate "New Horizons" issued in Hospital Book Guide in 1951, 1953, and 1956. Juvenile titles are not included since these are covered in Books to Help Children Adjust to a Hospital Situation, by Vera Flandorf. Medical, scientific, and technical books have also been omitted. Books are listed under specific handicaps and further subdivided into fiction and non-fiction. The compiler has chosen titles with a constructive and affirmative viewpoint, yet presenting the problems of the handicapped realistically. Not annotated.

Available free from the Library of the American Library Assn., 50 E. Huron St., Chicago 11, Ill.

HARD OF HEARING--SPECIAL EDUCATION

See 1295; 1351.

HEALTH SERVICES--PERSONNEL

1272. Anderson, Odin W.

The behavioral scientists and research in the health field; a questionnaire survey, by Odin W. Anderson and Milvoy Seacat. New York, Health Information Foundation (1957). 15 p. (Health Information Foundation research ser. 1)

The application of behavioral science research concepts and techniques to the social and economic aspects of the health field has increased since 1945 and may be due largely to stimulation provided by the Health Information Foundation's extensive research program. This booklet reports results of a survey of behavioral scientists currently engaged in research in the health field, giving data on their number, academic background and length of service in this field, channels of opportunities and sites of research, source of funds and size of budgets for projects, attitudes toward their work and toward professional health personnel, and observations on the future of behavioral scientists in the health field.

Available from Health Information Foundation, 420 Lexington Ave., New York 17, N.Y.

HEALTH SERVICES--SURVEYS--MASSACHUSETTS

See 1357.

HEART DISEASE

1273. Gardberg, Manuel (3439 Prytania St., New Orleans 15, La.)

Remarks on the rehabilitation of the cardiac patient. J. La. State Med. Soc. Sept., 1957. 109:9:335-338.

HEART DISEASE (continued)

Rehabilitation of the cardiac patient includes both physical and psychologic rehabilitation; it is with the latter aspects that this article is concerned. Using as an illustration how psychologic forces can do more to render the heart patient an invalid than the actual diminution of cardiac efficiency, Dr. Gardberg discusses management of the patient and the patient's family in such a way that personality efficiency may be preserved in the patient.

HEART DISEASE--EMPLOYMENT

1274. Jezer, Abraham (Altro Health and Rehab. Services, 71 West 47th St., New York 36, N. Y.)

Rehabilitation of the older cardiac patient, by Abraham Jezer and Bertram J. Black. Geriatrics. June, 1957. 12:6:375-380. Reprint.

The sheltered work rehabilitation setting provided by Altro Health and Rehabilitation Services, Inc., in New York City, offers the older "disabled" cardiac patient an opportunity to reestablish himself as a productive member of the community. The authors state that return to gainful employment is possible for 37 per cent of this group and experience of Altro Work Shops shows that an additional 21 per cent can be aided successfully when rehabilitation services are extended to stabilize social and psychological conditions.

HEART DISEASE (CONGENITAL)

1275. Tyler, H. Richard (Dr. Clark, 601 North Broadway, Baltimore 5, Md.)

Cerebrovascular accidents in patients with congenital heart disease, by H. Richard Tyler and David B. Clark. A. M. A. Arch. Neurol. & Psychiatry. May, 1957. 77:5:483-489. Reprint.

Of 1875 patients with congenital heart disease reported in an earlier paper by the authors, 72 had suffered cerebrovascular accidents. The present report is based on an analysis of their records. Data concern incidence of cerebrovascular accidents and type of congenital malformations of the heart, clinical history, the role of oxygen and polycythemia in hemiplegias, sequelae of hemiplegia in these patients, pathology, and differential diagnosis. Majority of the cerebrovascular accidents in this series occurred during the first two years of life and are most frequently seen in those forms of cyanotic heart disease which produce the severest hypoxia and polycythemia in the first two years of life. Following hemiplegia mental retardation was observed in 19 per cent of the survivors; convulsive disorders, in 11 per cent.

HERPES ZOSTER

1276. Kendall, David

Motor complications of herpes zoster. Brit. Med. J. Sept. 14, 1957. 5045:616-618.

In same issue: Malignant changes following herpes simplex, R. Wyburn-Mason, p. 615-616.

A presentation of 14 brief case histories in which patients suffered paralysis as a result of herpes zoster infection. Distribution of paralysis varied but corresponded approximately to distribution of the rash. Since it is now generally accepted that herpes is essentially an affection of the central nervous system rather than of the dorsal root ganglia, the not infrequent appearance of motor symptoms is logical. The author believes

HERPES ZOSTER (continued)

that a small proportion of cases of Bell's palsy may be due to herpes zoster; incidence of recovery of facial paralysis due to this cause is not so satisfactory as in true Bell's palsy. Recovery of paralyzed limbs is usually nearly complete.

The second article reports six cases of herpes simplex of the lips in elderly people followed by the development of squamous carcinoma six weeks to five years afterwards. The significance of observations in relation to the virus theory of cancer causation is considered.

HOSPITALS

1277. Shindell, Sidney (Conn. Commission on the Care and Treatment of the Chronically Ill, Aged, and Infirm, Rocky Hill, Conn.)

State sponsored programs in Connecticut help community hospitals care for the chronically ill. Hospitals. Sept. 16, 1957. 31:18:38-40.

A discussion of what Connecticut state agencies are doing in their attempt to relate state activities to those of general hospitals. State sponsored programs de-emphasize direct services as such; their purpose is to aid the local community in providing appropriate services. Nonprofit general hospitals are given grants by the state for the support of physical medicine services; similar grants are made for the establishment of community rehabilitation workshops or medically supervised graded activity centers. Home care programs are likewise state supported as long as they are local or regional. Methods of estimating services necessary to a given community are discussed.

MENTAL DEFECTIVES

1278. International Association of Applied Psychology. Twelfth Congress, July, 1955

A symposium: The social adjustment of the mentally deficient. Am. J. Mental Deficiency. Sept., 1957. 62:2:295-309.

Contents: I. Recent English research, A. D. B. Clarke. -II.. Adult adjustment of some deficient American children, Don C. Charles. -III. Family care in Denmark, Hans Otto T. Wildenskov.

The first paper discusses social adaptation of the mentally deficient from the English viewpoint and factors, discovered in English research, which make social adaptation difficult. Successful training schemes for rehabilitation of the mentally retarded are discussed. Dr. Charles, in the second paper, reports results of a long-term investigation of the social and economic adjustment of former pupils in Lincoln, Neb., "opportunity rooms," special classes in the regular public schools. The last article describes family care schemes for the mentally deficient in Denmark, as well as an internment scheme which places the worst cases on an island where they live freely but are prevented from escaping by the water barrier.

1279. Winthrop, Henry (Dept. of Psychology, Univ. of Wichita, Wichita, Kan.)

An inquiry concerning the prevalence of popular misconceptions relating to mental deficiency, by Henry Winthrop and Hayward Taylor. Am. J. Mental Deficiency. Sept., 1957. 62:2:344-348.

MENTAL DEFECTIVES (continued)

Contents of a pamphlet published in 1926 by the Natl. Committee for Mental Hygiene concerned 9 beliefs held by layman at that time, as well as the correct statements on these beliefs as supported by scientific investigation. The present study investigated what relationship, if any, exists between sex of the respondent and beliefs regarding mental deficiency. Sex differences in the holding of popular misconceptions were found for two of the sample of 9 major false beliefs current 30 years ago. A large percentage of the current sample of adults still hold to some of the misconceptions of the earlier period. There is no data available, however, for measuring the change in public enlightenment on the problems of mental deficiency.

See also 1309; 1358.

MENTAL DEFECTIVES--ILLINOIS

1280. Ricks, Victor E. (Univ. of Illinois, Chicago 11, Ill.)
State organization and administration. Am. J. Mental Deficiency.
Sept., 1957. 62:2:219-224.
A comparison of the administrative structure of various state agencies for institutional care of the mentally ill, including mental defectives and epileptics, and aid available to states through the National Health Act of 1946 for the development of comprehensive long-range programs for the improvement of mental health throughout the nation. Recommendations are made for more effective state organization; progress made in Illinois in meeting the challenge of mental illness and social maladjustment is cited.

1281. Weiner, Bluma B.

The development of the Illinois state schools for the mentally retarded. Public Aid in Ill. Aug., 1957. 24:8:8-14.

In this paper compiled from legislative regulations and statutes, facts about the development of Illinois state schools for the mentally handicapped illustrate welfare concepts which prompted their founding and principles which have influenced their development. Originally visualized as training schools and not as custodial institutions, the schools soon had to yield to public demand and accept custodial patients. The continued upward trend in population of both Lincoln and Dixon State schools has resulted in serious overcrowding and waiting lists for admission. An understanding of the true situation and trends of the program is necessary in planning improvements in service.

See also 1287.

MENTAL DEFECTIVES--MEDICAL TREATMENT

1282. Berman, H. H. (Willowbrook State School, Staten Island, N. Y.)
Pentylenetetrazol (Metrazol) in mental deficiency, by H. H. Berman
(and others). A. M. A. J. Diseases of Children. Sept., 1957. 94:3:231-
233. Reprint.

MENTAL DEFECTIVES--MEDICAL TREATMENT (continued)

Because beneficial results of the administration of pentylenetetrazol to senile and arteriosclerotic patients have been attributed to increased metabolism on the brain, the authors decided to test its effect on different groups of retarded children to determine its possible value in the treatment of mental deficiency. No improvement was noted in any of the children which could be attributed directly to the drug in the dosage administered. No change in intellectual functioning was noted; physical and emotional progress was consistent with the usual growth of these children for the time interval.

1283. Johnston, Alfred H. (Lakeland Village, Medicine Lake, Wash.)

The clinical use of reserpine and chlorpromazine in the care of the mentally deficient, by Alfred H. Johnston and Charles H. Martin. Am. J. Mental Deficiency. Sept., 1957. 62:2:292-294.

At Lakeland Village, an institution for the mentally retarded, 87 patients with deviant and disruptive behavior and all severely disturbed were placed on medication, one or the other of the drugs being selected at random. Both reserpine and chlorpromazine were found useful as tranquilizers for hyperactive, aggressive, and destructive patients. Where one drug failed, a change in medication was beneficial. In all cases, the authors state, individual selection of drugs and adjustment in dosage were necessary for best results.

1284. Levy, James M. (Winfield State Training School, Winfield, Kan.)

Effects of methylphenidate (Ritalin) on drug-induced drowsiness in mentally retarded patients, by James M. Levy, B. E. Jones, and Hugh T. Croley. Am. J. Mental Deficiency. Sept., 1957. 62:2:284-287.

A report of a double-blind study at Winfield State Training School to evaluate the efficacy of methylphenidate (Ritalin) in relieving drowsiness in mentally retarded patients receiving ataractic drugs and anti-convulsant medication. The question of whether there would be an increase in the number of seizures and/or a return of anti-social behavior was considered. It was found that Ritalin in a dosage level of 20 mg. was effective in increasing the alertness of 59 patients exhibiting drug-induced lethargy and drowsiness. The drug produced no significant changes in the total group in undesirable or anti-social behavior, number of seizures, or sleep patterns.

1285. Tarjan, George (Pacific State Hosp., Box 100, Pomona, Calif.)

Use of chlorpromazine in two hundred seventy-eight mentally deficient patients, by George Tarjan, Vincent E. Lowery, and Stanley W. Wright. A. M. A. J. Diseases of Children. Sept., 1957. 94:3:294-300.

Describes clinical experiences with chlorpromazine at Pacific State Hospital, an institution for the mentally retarded; it does not represent the results of a pre-planned research project. The drug was administered to 278 mentally deficient patients in doses ranging from 25 to 700 mg. per day and was considered by attending physicians to be an efficient and worthwhile medication for such symptoms as hyperactivity, aggressiveness, and withdrawal. It is emphasized that the drug is not a

MENTAL DEFECTIVES--MEDICAL TREATMENT (continued)

substitute for a wholesome environment but can help in the initiation of many psychotherapeutic programs. Before it or other tranquilizing drugs are prescribed for young patients, however, their effects on the intellectual and emotional growth of the average child should be investigated.

1286. Wolfson, Isaac N. (Letchworth Village, Thiells, N. Y.)

Clinical experience with Serpasil and Thorazine in treatment of disturbed behavior of mentally retarded. Am. J. Mental Deficiency. Sept., 1957. 62:2:276-283.

A preliminary report of 10 months' experience in the administration of both drugs to patients, male and female, at the Newark State School, Newark, N. Y. It is the belief of the author and staff that the introduction of the two tranquilizing drugs may be destined to play a greater role in the care of moderately and severely retarded patients. Usual complications associated with use of the drugs were observed but were of no serious consequence. In this limited study no advantages or disadvantages of one drug over the other were revealed.

See also 1265.

MENTAL DEFECTIVES--PROGRAMS

1287. Illinois. Commission for Handicapped Children (160 N. La Salle St., Chicago 1, Ill.)

Community programs for the mentally handicapped young adult, by the . . . Interdepartmental Committee on Mentally Handicapped Children. Chicago, The Commission, 1957. 31 p.

A pamphlet suggesting ways in which local groups might proceed in their attempts to understand the needs of mentally handicapped young adults and meet these need through available resources. Since special school programs do not extend beyond the compulsory school age limit of 16, there is great need for community programs to aid this group to participate more fully in community recreational, vocational, and social living. Not a technical manual in any sense, it discusses community surveys to establish need for such programs and the resources available, determining the type of program, using and developing resources, operation of the program, and provision for its evaluation. Appendixes contain a list of suggested readings and brief descriptions of four community programs existing in Illinois, each of which has a different objective.

MENTAL DEFECTIVES--PSYCHOLOGICAL TESTS

1288. Angelino, Henry (Univ. of Oklahoma, Norman, Okla.)

A study of the reactions to "frustration" of a group of mentally retarded children as measured by the Rosenzweig Picture-Frustration Study, by Henry Angelino and Charles L. Shedd. Psychological Newsletter. 1956. 8:49-54. Reprint.

Presents a summary of the literature on reactions to frustration in the mentally retarded and a report of a study to determine the relationship between intelligence and reactions to frustration, especially the question of whether or not "low" intelligence is a significant factor in

MENTAL DEFECTIVES--PSYCHOLOGICAL TESTS (continued)

reaction or frustration. The authors attempted to discover, also, if "low" intelligence affects only indirectly the capacity to face stress. Some significant differences were found in particular age groups between the experimental groups and the Rosenzweig norms. Further analysis indicated a retardation of reaction for the low groups rather than a basic difference in mode of reaction.

1289. Cassel, Robert H. (806 Third St., Dixon, Ill.)

Serial verbal learning and retroactive inhibition in aments and children. J. Clinical Psych. Oct., 1957. 13:4:369-372. Reprint.

A report of an experiment to compare the learning ability of normal children and familial and non-familial mental defectives. Results indicated that once adjusted to the learning task, mental defectives did as well as normal children. With the MA held constant, little or no difference in learning may be found between the groups. In terms of the "slow learner", the experiment suggests that it may be merely a matter of taking longer to adjust to the task.

1290. Hunt, Betty (Columbus State School, 1601 W. Broad St., Columbus, Ohio)

Performance of familial mentally deficient children in response to motivation on the Goodenough Draw-A-Man-Test, by Betty Hunt and Ruth M. Patterson. Am. J. Mental Deficiency. Sept., 1957. 62:2:326- 329.

A report of a study to determine the effects of two levels of motivation on performance by mentally deficient children diagnosed as familial. Specific comparison could then be made between effects of motivation on the performance of brain-injured children and familial children. Experience suggested that brain-injured children do not respond to abstract motivational factors but require a concrete reward for increase in performance. An abstract reward may only serve to confuse the brain-injured child in his ability to perform. With the familial child, other motivating influences can be used to improve performance. Further research is needed to verify findings reported here.

1291. Jacobs, James N. (Cincinnati Public Schools, 608 E. McMillan St., Cincinnati 6, Ohio)

A study of performance of slow learners in the Cincinnati public schools on mental and achievement tests. Am. J. Mental Deficiency. Sept., 1957. 62:2:238-243. Reprint.

A battery of mental and achievement tests was administered to a group of 293 pupils in special slow learning classes in the Cincinnati Public Schools to determine how well a group intelligence test correlates with success in academic achievement for slow learners, and what may be expected in average grade equivalent level in reading, language, and arithmetic in the latter years of public school attendance. Comparing results of achievement testing with the expected achievement of children of similar mental ages but with average IQ's, the slow learners achieved slightly above what would normally be expected at their level of mental functioning.

MENTAL DEFECTIVES--PSYCHOLOGICAL TESTS (continued)

1292. May, W. Theodore (Gailor Psychiatric Hosp., 42 N. Dunlap St., Memphis, Tenn.)

The relationship between the Stanford-Binet (Form L) vocabulary and the Columbia Mental Maturity Scale in a group of mentally retarded children, by W. Theodore May and Harold W. Perry. Am. J. Mental Deficiency. Sept., 1957. 62:2:330-333.

A study to ascertain the relationship of the Binet Vocabulary (Form L) and the CCMS on a group of educable mentally retarded children in special classes in the Memphis Public School system. The 1 per cent level of significance between the two tests is not felt to be an adequate relationship for using the two tests interchangeably. Results of this study substantiate conclusions of two previous studies, cited in the bibliography, on normal and cerebral palsied children with wider intelligence ranges. The authors feel that marked revisions of the CCMS seem to be in order.

1293. McCulloch, Thomas L. (Letchworth Village, Thiells, N. Y.)

The retarded child grows up; psychological aspects of aging. Am. J. Mental Deficiency. Sept., 1957. 62:2:201-208.

In his Presidential address to the 1957 annual convention of the American Assn. on Mental Deficiency, Dr. McCulloch discusses some preliminary data collected in a long term project on behavioral correlates of mental retardation, findings of which would seem to indicate that mental growth in these retardates occurs well past the age which clinicians have been accustomed to accept as the limit. Also, decline in general mental ability may be much smaller than believed. The study has implications for further research along many lines.

1294. Sharp, Heber C. (158 E. Third North, Logan, Utah)

A comparison of slow learner's scores on three individual intelligence scales. J. Clinical Psych. Oct., 1957. 13:4:372-374. Reprint.

Results of testing 50 slow learning children ranging in age from 8 years 0 months to 16 years 5 months by means of the Stanford-Binet Intelligence Scale (Form L), the Wechsler Intelligence Scale for Children, and the Leiter International Performance Scale. Mental defectives score higher, generally, in performance items than on verbal. One purpose of the testing was to check further the adequacy of LIPS norms and to explore the amount of interest variation. Relationship between the WISC and the LIPS was greater than that found between LIPS and S-B. Mean differences were insignificant but the interest variation was significant. The adequacy of the LIPS norms for older mentally retarded children is questioned.

See also 1323; 1324.

MENTAL DEFECTIVES--SPECIAL EDUCATION

1295. Johnston, Philip W. (Mass. Dept. of Public Health, 88 Broad St., Boston, Mass.)

An experiment in improved medical and educational services for hard of hearing children at the Walter E. Fernald State School, by Philip W. Johnston and Malcolm J. Farrell. Am. J. Mental Deficiency. Sept., 1957. 62:2:230-237.

MENTAL DEFECTIVES--SPECIAL EDUCATION (continued)

A limited progress report of an experimental investigation begun subsequent to the completion of a hearing survey at the Walter E. Fernald State School, Waverly, Mass., to determine the benefits--or lack of benefits--to be expected when certain types of mentally retarded and hard of hearing children are given optimal medical and educational care, all aimed directly at improving the children's ability to communicate. An unexpected result of the study was the conclusion that not one child had been basically misclassified because of an unrevealed hearing impairment. Data on experimental results are tabulated. A final interpretation will not be attempted until the termination of the project.

1296. Lapp, Esther R. (Coshocton Public Schools, Coshocton, Ohio)

A study of the social adjustment of slow-learning children who were assigned part-time to regular classes. Am. J. Mental Deficiency. Sept., 1957. 62:2:254-262. Reprint.

A report of a study to determine the social acceptance and rejection of special class pupils when they participated in part-time regular classes. An evaluation was made of the social acceptance or rejection of slow learners among their peers in the special class and in the regular class, what effect placement in the special class has on the child's social position, and the causal factors for acceptance or rejection. A review of previous studies in this area is included and methods of the present study discussed.

1297. Preston, Eleanora Marie (Los Angeles State Coll. of Applied Arts and Sciences, 855 N. Vermont Ave., Los Angeles 29, Calif.)

A comparative study of programs for the education of the severely retarded as compared with opinions of what teachers in these programs believe they should be. Am. J. Mental Deficiency. Sept., 1957. 62:2:263-266.

A report on existing programs of education for the severely mentally retarded in the public schools of California and a comparison of these programs with what teachers feel they should ideally be. Conclusions and implications of the findings for education of the severely mentally retarded are discussed briefly and additional research in this area is suggested.

MENTAL DEFECTIVES--SPECIAL EDUCATION--STUDY UNITS AND COURSES

1298. Snyder, Elkan E. (224 E. 28th St., New York, N. Y.)

A county-wide program and approach to problems involved in the education and training of mentally retarded and brain-injured children. Am. J. Mental Deficiency. Sept., 1957. 62:2:215-218.

Describes how the Syracuse University Special Education Program was organized and administered in Silver Springs, Md., for the purpose of certifying and preparing special education teachers unable to attend summer courses at universities away from their homes. Demonstration and practice teaching classes were set up with children recruited from the community. An experienced and well-trained staff of instructors in specific areas of work with retarded and brain-injured children provided scheduled courses, seminars, and workshops, as well as special consultation services to the community. Parent group work was also a feature of the program.

MENTAL DEFECTIVES--SPEECH CORRECTION

1299. Goertzen, Stanley M.

Speech and the mentally retarded child. Am. J. Mental Deficiency.
Sept., 1957. 62:2:244-253.

A review of the leading studies in the related fields of mental retardation and speech, discussing the relationship between intelligence and speech development and principles of speech therapy as applied to the mentally limited. A comparison is made of the development of speech in normal and mentally retarded children and the incidence of speech defects and language disorders found in mental defectives. Speech characteristics of the mentally retarded and differentiations according to clinical types are considered. 38 references.

1300. Miller, Irene (Dixon State School, Dixon, Ill.)

Help them talk, by Irene Miller and Geraldine Welty. Exceptional Children. Sept., 1957. 24:1:40, 42-43.

Many exceptional children, especially the educable mentally handicapped, fail to produce the correct blend sounds associated with written symbols. The child with low mental ability needs systematic training in methods of word recognition. The authors describe a speech project which includes word games for the recognition of blends and for learning the sounds of consonants; visual auditory perception is improved through various play situations creating interest in the learning process.

MENTAL DISEASE--PSYCHOLOGICAL TESTS

1301. Scherer, Isidor W. (V. A. Hosp., Northampton, Mass.)

Psychological changes over a five year period following bilateral pre-frontal lobotomy, by Isidor W. Scherer, C. James Klett and John F. Winne. J. Consulting Psych. Aug., 1957. 21:4:291-295.

Completing a 5-year program of lobotomy research based on periodic psychological testing following the operation, the authors report findings and conclusions with results of the testing. Both the control group and the experimental group (composed of 50 white, male, schizophrenic patients) stabilized between the third and fifth year when there was essentially no net change. The lobotomy group (28 of the group of 50 patients) was generally superior to its preoperative level and to the control group after 5 years, in that it maintained its gains. Discharge rate did not reflect the positive gain shown on psychological tests. Earlier reports of the authors on this project are listed in the bibliography.

MENTAL DISEASE--STATISTICS

1302. Pasamanick, Benjamin (Ohio State Univ. Coll. of Medicine, Columbus, Ohio)

A survey of mental disease in an urban population: 1. Prevalence by age, sex, and severity of impairment, by Benjamin Passamanick (and others). Am. J. Public Health. Aug., 1957. 47:8:923-929.

A preliminary report of findings in a study conducted by the Commission on Chronic Illness, one phase of which investigated a subsample of the total population sampled for prevalence of chronic illness and needs for care in Baltimore. A clinical evaluation of the subsample was made to determine the prevalence of psychoses, psychoneuroses, and psychophysiological autonomic

MENTAL DISEASE--STATISTICS (continued)

and visceral disorders and their distribution by sex, age, and severity of impairment. Results suggest that more research and community action is vital in this area; conservative estimates indicate that approximately 10 per cent of a noninstitutional urban population are at one time mentally ill. Methods and limitations of this particular study are discussed.

MONGOLISM

1303. Kravit, William (Dept. of Pediatrics, Univ. of Minnesota Med. School, Minneapolis 14, Minn.)

Simultaneous occurrence of mongolism and leukemia; report of a nationwide survey, by William Kravit and Robert A. Good. A.M.A. J. Diseases of Children. Sept., 1957. 94:3:289-293.

A report of a nationwide survey of the joint occurrence of leukemia and mongolism during the period 1952 through 1955, inclusive, results of which suggest that the condition occurs much more frequently than can be explained by chance alone. Data seem to indicate that a common factor is operating to result in the occurrence of leukemia in mongoloid children in a frequency in excess of its occurrence in the general population. As an aid in further research into the nature of both diseases, it is urged that all cases of the leukemia-mongolism syndrome observed during 1956 and 1957 in children 0 to 4 years of age be reported to the authors.

MULTIPLE SCLEROSIS

1304. Passer, Bernard (19361 Wyoming St., Detroit 21, Mich.)

Multiple sclerosis. Phys. Therapy Rev. Sept., 1957. 37:9:575-581.

The author abstracts some findings of investigators in the field of multiple sclerosis and gives personal observations on the methods used in treating such patients at the Michigan Multiple Sclerosis Center, Detroit. Statistics on incidence from a pilot study in Michigan are presented; etiology, pathology, clinical symptomatology, psychological factors, and onset and course of the disease are discussed. The triple treatment of histamine, antibiotics, and physical therapy is, in his opinion, as effective as any treatment methods used at the Center.

MULTIPLE SCLEROSIS--MEDICAL TREATMENT

1305. Rogoff, Joseph B. (136 W. 16th St., New York 11, N. Y.)

Rehabilitation in multiple sclerosis. Brit. J. Phys. Med. Sept., 1957. 20:9:200-204.

Treatment of multiple sclerosis by other than rehabilitative methods has so far been disappointing; even rehabilitative treatment is not concerned primarily with the etiology and cure of the disease but with training for utilization of the remaining faculties of the disabled person. Discussed here are: prognosis, secondary complications of the disease, rehabilitation techniques, treatment of ataxia, use of braces for lower extremities, treatment of spasticity, care of bowel and bladder, and home care. Long life expectancy in multiple sclerosis patients makes rehabilitation treatment imperative even when the gains may be small.

MULTIPLE HANDICAPS

See 1253; 1295.

MUSCLES

1306. Williams, John D. (Guy's Hosp., London, S.E. 1, England)

Electrolyte levels in normal and dystrophic muscle determined by neutron activation, by John D. Williams (and others). Lancet. Sept. 7, 1957. 273:6993:464-468.

A report of a study supported in part by grants from the U.S. Public Health Service and Muscular Dystrophy Associations of America. Using the method of neutron activation, samples of skeletal muscle from patients with progressive muscular dystrophy, miscellaneous muscular disorders, and from the healthy were analyzed for sodium, potassium, and phosphorus. Findings revealed that levels of potassium referred to in the non-collagen nitrogen of the tissue were significantly lower in the dystrophic group than in the normals. Sodium levels were higher in the dystrophics in a similar degree of significance.

MUSCULAR DYSTROPHY

1307. Swinyard, Chester A. (Univ. of Utah School of Med., Salt Lake City 2, Utah)

Gradients of functional ability of importance in rehabilitation of patients with progressive muscular and neuromuscular diseases, by Chester A. Swinyard, George G. Deaver, and Leon Greenspan. Arch. Phys. Med. and Rehab. Sept., 1957. 38:9:574-579. Reprint.

Criteria for rating 8 stages of functional ability are based on the pattern, ability and method of ambulation and on the adequacy of activities of daily living. Use of the classification is illustrated by plotting (on a grid) the progressive stages of functional disability of 3 clinical types of progressive muscular dystrophy and an infantile and adult type of progressive muscular atrophy. Graphic presentation of progressive disability in functional terms enables visualization of the natural history of these diseases and anticipation of problems in rehabilitation. Data from the case histories emphasize the necessity of clearly segregating clinical types of the disease before evaluating the usefulness of procedures in rehabilitation.

MUSCULAR DYSTROPHY--MEDICAL TREATMENT

1308. Wilson, George Darwin (300 Longwood Ave., Boston 15, Mass.)

Proteins in muscular dystrophy. South. Med. J. Apr., 1957. 50:4: 460-466. Reprint.

Presents the author's observations on the use of protein hydrolysates in muscular dystrophy; 12 brief case histories are included. Although protein therapy has been reported both favorably and unfavorably, the author believes that some of the results of its use are so favorable the therapy warrants further exploration. Seven patients reported here received therapy for six months to three years; the first muscle to increase noticeably in size was the vastus internus. Hemoglobin improved following protein therapy in all cases that were subnormal. The most outstanding improvement in every patient was the increase in mental alertness. Entozyme tablets, a proteolytic enzyme, were added to treatment to enhance the metabolism of protein hydrolysate. An abstract of the discussion following presentation of the paper is included.

MUSIC THERAPY

1309. Murphy, Mary Martha (State Colony, Woodbine, N.J.)

Rhythrical responses of low grade and middle grade mental defectives to music therapy. J. Clinical Psych. Oct., 1957. 13:4:361-364. Reprint.

Social and emotional implications of the rhythmical activities of low-grade and middle grade defectives in a series of non-directive music therapy sessions were evaluated; two specific actively participating groups were identified. Results suggested that responses may reflect the social-emotional levels of development, as well as the degree of intellectual and motor development which has been attained. It is suggested that observation of rhythmical responses in these two grades of mental defectives could be utilized to evaluate individual social-emotional levels of development.

NATIONAL TUBERCULOSIS ASSOCIATION--HISTORY

See 1361.

NEUROLOGY

1310. Colover, Jack (Red Cross Memorial Hosp., Taplow, Buckinghamshire, England)

The demyelinating diseases and recent advances in this field. Postgrad. Med. J. Mar., 1957. 33:377:115-120, 140. Reprint.

A classification of the demyelinating diseases, both acute and subacute, their mode of onset, and duration of the active phase of illness, as well as a review of recent research concerning their etiology and pathogenesis.

See also 1248; 1276; 1306.

NURSERY SCHOOLS

1311. Buckman, Wilma (Dr. Gofman, Dept. of Pediatrics, Univ. of Calif. Med. Center, San Francisco 22, Calif.)

Nursery school; notes for the physician, by Wilma Buckman, Helen Gofman, and George H. Schade. A.M.A. J. Diseases of Children. Sept., 1957. 94:3:258-264. Reprint.

A discussion of what the physician should know in order to help parents evaluate whether nursery school is the answer to their child's and their own needs. Considered are the parents' motivation for wishing to enroll the child in nursery school, the child's basic needs, how they are satisfied in the home and supplemented in the school, functions of the nursery school, and the child's readiness for such an experience. Criteria for evaluating the quality of a particular nursery school are included.

NUTRITION

See 1307; 1355.

OLD AGE

1312. Rusk, Howard A. (400 E. 34th St., New York 16, N.Y.)

Rehabilitation and restorative services, by Howard A. Rusk and Michael M. Dasco. J. Am. Med. Assn. Sept. 28, 1957. 165:4:360-362.

OLD AGE (continued)

The sixth in a series of papers on various aspects of aging, prepared for the Committee on Aging by authorities in the field. The series will be published in booklet form as soon as it is completed. Drs. Rusk and Dasco, authorities in the field of physical medicine and rehabilitation, discuss here the objectives of rehabilitation and management of the disabled elderly patient. Techniques of clinical diagnosis in successful rehabilitation are considered, especially as they are applied in restoration of useful function to the elderly.

OLD AGE--PROGRAMS

See 1239.

ORTHOPEDICS

See 1359.

PARAPLEGIA

1313. New York University-Bellevue Medical Center. Institute of Physical Medicine and Rehabilitation (400 E. 34th St., New York 16, N.Y.) Primer for paraplegics and quadriplegics. New York, The Institute, 1957. 38 p. illus. (Patient publ. no. 1) 50¢.

The first of a series of publications for patients with specific disabilities and their families which will be issued by the Institute of Physical Medicine and Rehabilitation and reflect the experience of the Institute in its rehabilitation work. Prepared by Dr. Seymour S. Bluestone with the assistance of senior faculty members of the Dept. of Physical Medicine and Rehabilitation, New York College of Medicine, it explains in lay language facts about spinal cord injury, specific problems faced by one with partial or total paralysis from spinal cord injury, the philosophy of living with this disability, and daily methods and practices for coping with specific problems--care of the wheelchair, braces, personal hygiene, nutrition, bladder and bowel care, and the vocational aspects of spinal cord injury. Reference is made to those government and voluntary agencies which offer aid in the solution of the paraplegic's or quadriplegic's problems.

PARAPLEGIA--BIOGRAPHY

1314. Edwards, J. A.

Personal adjustment to disability. Soc. Service Quart. June-Aug., 1957. 31:1:18-22.

The Welfare of the Disabled No. 19

A paraplegic gives his personal views on ways and means of adjusting to a handicap and leading a useful, independent life. Although paralyzed in both legs and the lower part of his trunk at the age of 17, he obtained a university degree, became a local government officer, and later a teacher. As he sees it, the handicapped person seeking employment should, if possible, possess some special qualification or special skill if he is to be successful. Acceptance of his disability by his friends and pupils, their confidence in his ability, and the right perspective on his handicap have enabled him to lead a full life.

See also 1360.

PARAPLEGIA--EMPLOYMENT

1315. U. S. Veterans Administration

Occupations of paraplegic veterans of World War II and Korea, prepared by the Department of Veterans Benefits...June, 1957. Washington, D.C., Gov't Print. Off., 1957. 52 p. (VA pamph. 7-12)

The second in a series of VA pamphlets being prepared to aid VA field personnel engaged in counseling and vocational rehabilitation of seriously disabled veterans, it contains information on the adjustment in employment of several hundred paraplegic veterans. Job titles follow the Dictionary of Occupational Titles and cover a wide variety and range of occupations. Brief information on industry and type of establishment (or self-employed), length of time employed, physical effects of disability, job duties, hours per week, and evaluation of adjustment is included in each instance. Sources of further information are indicated on cases presented.

Available from U.S. Superintendent of Documents, Government Printing Office, Washington 25, D.C., at 35¢ a copy.

PARAPLEGIA--EQUIPMENT

See 1246; 1346.

PHYSICAL EXAMINATIONS

1316. Hunsicker, Paul (Univ. of Michigan, Ann Arbor, Mich.)

Physical fitness tests. J. Health, Phys. Educ., and Recreation. Sept., 1957. 28:6:21-22, 68-69.

A brief discussion of what constitutes physical fitness, why tests differ, and of some selected tests which could be administered in the average public school. These do not include tests of heart output, oxygen consumption, blood changes, or other physiological phenomena requiring special equipment and technical competence. All those included here call for a minimum of equipment.

The entire issue of the Journal is given over to articles on programs for physical fitness, reflecting the interest of the American Assn. for Health, Physical Education, and Recreation in this timely subject. It will be the theme of their 60th annual convention in March, 1958.

Other articles included are: All-around fitness for all, Gene Kidder. - Fitness through outdoor education, Julian W. Smith. -An athletic director looks at fitness, T. J. Hamilton. -Fitness through intramurals, Mary Elizabeth McCoy. -Fitness through health education, Robert Yoho. -Progress report on AAHPER's fitness program, including lists of Fitness Committees and recent articles on fitness, Carl A. Troester, Jr. -A doctor looks at exercise and fitness, Donald A. Dukelow. -Fitness through creative gymnastics, Elly Friedmann-Wittkower. -Fitness through recreation, Harlan G. Metcalf. -Fitness in Illinois; First Governor's Conference on Youth Fitness, C. O. Jackson and Ralph Johnson. -About the President's Council on Youth Fitness. -A review of State fitness. -A review of State fitness activities, 1957.

PHYSICAL THERAPY--RESEARCH

1317. Gandevia, Bryan

Research in physiotherapy; the principles of clinical research work.
Physiotherapy. Sept., 1957. 43:9:257-267.

Reprinted from: Australian J. Physiotherapy. 1956. 2:1.

A discussion of ways in which various forms of treatment may be compared and assessed, how research projects are selected, methods for setting up the experiment, limitations in experiments and their significance. Three possible projects are discussed, illustrating how research methods could be applied in a comparison of methods of treatment..

POLIOMYELITIS

1318. Bosma, James F. (1490 S. Second East, Salt Lake City 15, Utah)

Residual disability of pharyngeal area resulting from poliomyelitis; clinical management of patients. J. Am. Med. Assn. Sept. 21, 1957. 165:3:216-221.

This article, one of a series of clinical reports by the author under a grant from the National Foundation for Infantile Paralysis, discusses motor disabilities of the pharynx following recovery from bulbar poliomyelitis, the particular handicaps of performance and their relief or amelioration. Dr. Bosma offers a clinically useful classification of impairments of the mouth-pharynx area and methods of their management, as well as general principles of rehabilitation to be followed in treating these patients.

POLIOMYELITIS--EQUIPMENT

See 1346.

POLIOMYELITIS--MENTAL HYGIENE

See 1321.

PREGNANCY

1319. Scudamore, Harold H. (200 First St., S.W., Rochester, Minn.)

Ileostomy and pregnancy, by Harold H. Scudamore and Edward A. Banner. Ileostomy Quart. July, 1957. 1:4:49-51.

Some advice to the ileostomy patient on the effects of pregnancy on chronic ulcerative colitis, the ileostomy, or the posterior scar. The ideas expressed are based on the author's experience with 12 ileostomy patients with 18 pregnancies.

PSYCHIATRY

1320. Braceland, Francis J. (200 Retreat Ave., Hartford 2, Conn.)

The role of the psychiatrist in rehabilitation. J. Am. Med. Assn. Sept. 21, 1957. 165:3:211-215.

The disciplines of rehabilitation and psychiatry are both founded on the philosophy of consideration of the "whole" man; both work within the therapeutic framework and in the context of group dynamics. The insights of psychiatry are necessary to the rehabilitation team which must deal with personal, interpersonal, and social meaning of illness in the patient. Discussed here are the psychological hazards of disability, the necessity

PSYCHIATRY (continued)

for the patient to accept his handicap, the role of the rehabilitation worker in promoting motivation in patients, and the value of high group morale in the rehabilitation team. The psychiatrist, as one member of this team, must assume a predominantly advisory and educational role.

This paper, the Fifth Annual Dr. Fred H. Albee Memorial Lecture, was read before the Kessler Institute for Rehabilitation, West Orange, N.J., in Nov., 1956.

1321. Prange, Arthur J., Jr. (North Carolina Memorial Hosp., Chapel Hill, N.C.)

Psychic events accompanying an attack of poliomyelitis, by Arthur J. Prange, Jr. and David W. Abse. Brit. J. Med. Psych. Aug., 1957. 30:Part 2:75-87. Reprint.

Gives a brief review of the literature concerning subjective experiences of poliomyelitis patients, followed by an autobiographical account of one author's experience of the acute stage of this illness. Special attention is paid to specific disturbances of somatic function which engendered heightened anxiety. Also describes evidence of a partial regression to a very primitive ego state, as well as a sequence of defensive manoeuvres used in the process of reorganization. The implications of the study for physicians and nurses who can facilitate the reconstructive efforts of patients and avoid the problems of counter-transference are discussed.

1322. Titchener, James L. (Dept. of Psychiatry, Cincinnati Gen. Hosp., Cincinnati 29, Ohio)

Consequences of surgical illness and treatment; interaction of emotions, personality, and surgical illness, treatment, and convalescence, by James L. Titchener (and others). A.M.A. Arch. Neurology and Psychiatry. June, 1957. 77:6:623-634. Reprint.

Two hundred randomly selected surgical patients were studied as to their over-all adaptation to surgical illness and treatment during hospitalization, convalescence, and recovery. While 70 per cent of the patients were rated as improved surgically 3 to 6 months after discharge from the hospital, these same patients were found to be divided equally with respect to change in psychiatric status. About one-third were improved, another third exhibited persistent maladjustment, and the remainder were worse in adjustment. Surgically stationary patients were almost all rated persistent in maladjustment; the surgically worse patients were worse psychiatrically after convalescence. Implications of the study for preventive psychotherapy in the hospital are discussed.

PSYCHOLOGICAL TESTS

1323. Blackman, Leonard S. (Edward R. Johnstone Training and Research Center, Bordentown, N.J.)

Toward the concept of a "just noticeable difference" in IQ remediation. Am. J. Mental Deficiency. Sept., 1957. 62:2:322-325.

PSYCHOLOGICAL TESTS (continued)

Some suggestions for further research in establishing the unit of "just noticeable difference" in IQ shift; in other words, how much improved behavior, as measured by some intelligence test, is necessary to produce one unit of JND in the perception of those who live and work with the child. Research would be based on comparison of IQ level with relevant extra-test behaviors on which the child may be rated by a parent or teacher. Careful analysis and control would be necessary in the type of research which the writer envisions.

PSYCHOLOGY

1324. Goodnick, Benjamin (1018 Medical Arts Bldg., 16th & Walnut Sts., Philadelphia 2, Pa.)

Interpersonal relationships within a special class group. Am. J. Mental Deficiency. Sept., 1957. 62:2:310-321.

Sociometric analysis was used to estimate objectively the social interactions of retarded children in a special (Orthogenic Backward) class. The author believes that the real gain from a study of this type is for the teacher or leader of such a group since it affords insight into group situations and factors that underlie interactions within the group. Although experimental, the study demonstrates the need for more knowledge and understanding of the mental, emotional, and physical reactions of the retarded, their reactions to one another and to society at large.

1325. Shontz, F. C. (Highland View Cuyahoga County Hosp., Harvard Rd., Cleveland 22, Ohio)

The significance of patient-staff rapport in the rehabilitation of individuals with chronic physical illness, by F. C. Shontz and S. L. Fink. J. Consulting Psych. Aug., 1957. 21:4:327-334.

Using semantic differential methodology, the authors evaluated the research proposition, that patients with chronic physical illness who are on an intensive treatment program have closer communicative rapport with occupational and physical therapists than do those not on intensive treatment programs. Supplementary investigations to determine effects of variables such as sex, age, and length of hospital stay upon communicative rapport, were made. "Semantic distance" between patient and therapist was found to be significantly reduced under conditions of intensive treatment; this may be considered an important contribution to the psychological side of rehabilitation. A theory of "patterning" is presented to unify findings and to suggest further research.

PUBLIC ASSISTANCE

1326. U. S. Bureau of Public Assistance

Public assistance under the Social Security Act: Old-age assistance, aid to dependent children, aid to the blind, aid to the permanently and totally disabled. Washington, D.C., Gov't Print. Off., 1957. 29 p. tabs., graphs. (August, 1957).

Briefly describes the four public assistance programs and explains responsibilities of the Federal agency and State governments under the Social Security Act. Issued in response to requests for information on

PUBLIC ASSISTANCE (continued)

the programs, it would be of value to public welfare agencies for orienting and training their staffs. Selected data on the programs and their recipients are included.

Available from U. S. Superintendent of Documents, Washington 25, D.C., at 25¢ a copy.

REHABILITATION

1327. Bakst, Henry J. (Dept. of Indust. Rehab., Mass. Memorial Hosp., Brookline 46, Mass.)

Social and historical aspects of rehabilitation. Boston Med. Quart. May, 1957. 8:1:20-24. Reprint.

The impact of World War I on public attitudes toward rehabilitation of the war disabled led to legislation under which vocational rehabilitation developed; by 1920 12 states had passed rehabilitation legislation similar to that enacted in Massachusetts. In the same year Federal legislation established vocational rehabilitation on a temporary and experimental basis. The author discussed growth of the program to the present time, as well as the scope of the current program and the Boston University program of service, education, and research. Data are included on the extent of the problem of long-term disability and how it affects the economic and social adjustment of the entire family.

1328. McMorris, Rex O. (340 E. Madison St., Louisville 2, Ky.)

Rehabilitation and medicine. J. Ky. State Med. Assn. June, 1957. 55:6:522-524. Reprint.

A definition of what constitutes rehabilitation of the physically handicapped, the role of the physician, the changing approach to rehabilitation in the community, and the need for medical direction in the community rehabilitation center. With an increase in the incidence of traumatic injury and an aging population, the challenge to medicine in the provision of rehabilitation services is evident.

1329. Reedy, Corbett (700 E. Jefferson St., Charlottesville, Va.)

Rehabilitation problems of the aging and chronically ill. Va. Med. Month. Apr., 1957. 84:4:187-189. Reprint.

Defines the modern concept of total rehabilitation, a "composite science" combining a wide variety of factors and services. Chronic and aged patients present the greatest challenge to rehabilitation, the major problem being to find employment for the chronically disabled over 50. Maintenance of physical fitness and health and social adjustment are equally as important to the achievement of personal competence and security. While state and federal agencies have the responsibility of stimulating interest in rehabilitation programs, the community must take the initiative in providing services adequate to meet the local problem.

See also 1312.

REHABILITATION--POLAND

1330. Hulek, Aleksander (Polish Ministry of Labour and Social Welfare, Warsaw, Poland)

How Poland serves the disabled. J. Rehab. July-Aug., 1957. 23:4:11-12.

A brief review of the services for medical, educational, and vocational rehabilitation in Poland in a program administered by the state and available to all citizens, usually without charge to the disabled person. For a more extended description of Poland's rehabilitation program, see the pamphlet by the same author, listed in Rehabilitation Literature, Aug., 1957, #1008.

REHABILITATION--PERSONNEL

See 1320; 1325.

REHABILITATION--PROGRAMS

1331. Pollack, Jerome (8000 E. Jefferson Ave., Detroit 14, Mich.)

Moving with the times on the rehabilitation front. J. Rehab. July-Aug., 1957. 23:4:4-6, 12.

With an increasing and aging population, rising standards of health security, and greater demands for rehabilitation services, Federal-State programs must expand, health insurance programs should be made to share the burden of rehabilitation needs, and long-term disability insurance considered as a resource in rehabilitation. Rehabilitation programs of tomorrow will be broadened and the goals of today seem narrow in comparison, Mr. Pollack predicts. Changes and expectations of rehabilitation in the future are discussed.

1332. Rehabilitation (symposium). Public Health Rep. Sept., 1957. 72:9:809-841.

Contents: A guide for referral agencies, E. B. Whitten. -Community plan for epileptics, Frank Risch and Augustus S. Rose. -Hearing and acoustical handicaps, LeRoy D. Hedgecock. -Program for the cerebral palsied, Willis C. Gorthy and Martin G. Moed. -Speech problems of hemiplegics, Martha Taylor and Howard A. Rusk. -Recovery from mental illness, Milton Greenblatt. -The road forward.

Through the cooperation of Miss Mary E. Switzer, director of the U.S. Office of Vocational Rehabilitation, Public Health Reports obtained this group of papers relating rehabilitation to public health work. Where certain categories of disability were concerned, the contributors have endeavored to describe the nature of the disability, remedial potentials, methods, typical complications, and reasonable goals. Additional papers will appear in subsequent issues of Public Health Reports.

REHABILITATION--STUDY UNITS AND COURSES

1333. Warren, Sol L. (N. Y. State Div. of Voc. Rehab., 111 Broadway, New York 6, N. Y.)

The short-term institute as a training aid in rehabilitation, by Sol L. Warren and Daniel S. Sanford. Personnel and Guidance J. Sept., 1957. 37:1:28-33.

Comments on... by James F. Garrett, p. 32-33.

REHABILITATION--STUDY UNITS AND COURSES (continued)

A report of a survey of 6 short-term training institutes conducted in the New York City metropolitan area. These constituted a part of the 20 sponsored by the U. S. Office of Vocational Rehabilitation throughout the United States from June 1 through August 31, 1955. Significant data from a questionnaire and personal interviews are discussed; topics covered are sponsorship, objectives, attendance and duration, instructional methods employed, specialties of instructional staffs, and evaluation. Dr. Garrett, in his comments on the nature and purpose of such institutes, recognizes them as a device for rapid orientation and a means of keeping rehabilitation staff personnel up to date. He feels, however, that it is necessary to have well-planned institutes with definitive objectives and a "built-in" evaluative technique if they are to succeed as a part of the total process of staff development and professional growth.

REHABILITATION CENTERS

1334. Gorthy, Willis C. (400 First Ave., New York 10, N. Y.)

The shortage of vocationally oriented rehabilitation centers; a community dilemma. J. Rehab. July-Aug., 1957. 23:4:7-8, 14-16.

A review of the results of the Hill-Burton Hospital Act since its amendment to provide federal support for the construction of rehabilitation centers. With 54 such centers currently under construction, it is possible to evaluate whether this program is developing in a pattern that promises to meet adequately the total needs of the handicapped. Present trend is toward centers that are part of a hospital and thus, hospital standards have been incorporated in their construction. Too little attention is being given to the distribution of centers according to concentrations of population and too few offer the vocational services which state rehabilitation agencies must demand since they are limited to serving those who have vocational potential. The writer suggests two major types of centers if needs of all the disabled are to be served.

SCHOOL BUILDINGS

1335. Graham, J. P.

When you build, don't forget the handicapped. Ill. School Board J. Sept.-Oct., 1957. 24:5:7-10.

To further the integration of exceptional or handicapped children into the regular school building and program, special adaptations in building plans for new buildings or in remodeling older buildings can aid the child who is handicapped. Some basic requirements to meet the needs of six recognized groups of exceptional children are listed briefly. Trained consultants working under the Director of Education for Exceptional Children are available in Illinois for assistance in establishing special education programs and in planning special facilities for the handicapped. The May, 1956 issue of Educational Press Bulletin, compiled by these consultants, is devoted entirely to various building needs of exceptional children. It is published by the Office of the Superintendent of Public Instruction, Springfield, Ill.

This issue of Illinois School Board Journal is available from its editorial offices, 223 1/2 E. Washington St., Springfield, Ill.

SCLEROSIS

1336. Proc., Staff Meetings Mayo Clinic. Aug. 21, 1957. 32:17.

Title of issue: Symposium on amyotrophic lateral sclerosis.

Contents: Introduction, Lee M. Eaton. - The clinical syndrome of amyotrophic lateral sclerosis, Donald W. Mulder. - Pulmonary disability as a symptom of amyotrophic lateral sclerosis, R. Drew Miller. - Esophageal motility in amyotrophic lateral sclerosis, Alan W. M. Smith, Donald W. Mulder, and Charles F. Code. - Electromyographic studies in amyotrophic lateral sclerosis, Edward H. Lambert and Donald W. Mulder. - Amyotrophic lateral sclerosis; pathologic aspects, George P. Sayre. - Epidemiologic investigations of amyotrophic lateral sclerosis; III. A genetic interpretation of incidence and geographic distribution, Leonard T. Kurland.

SHELTERED WORKSHOPS

1337. New Jersey Rehabilitation Commission (40 S. Clinton Ave., Trenton, N. J.)

Guide for the organization of rehabilitation workshops, by Morton Goldstein and Louis Schwartz. Trenton, The Commission, 1956. 11 p.

The authors' purpose in presenting this material is to provide for professional personnel and community agencies a broad frame of reference for community planning, organization, and establishment of rehabilitation workshops. Discussed are: scope of the problem, the approach to community planning for a rehabilitation workshop, administration (board of directors and advisory board), the workshop program and intake procedures, types of training offered clients, duties of staff members (director, personnel supervisor, and production supervisor), and the role of the New Jersey Rehabilitation Commission. Includes a 3-page bibliography on the sheltered workshop.

1338. Sheltered employment; a symposium. New Outlook for the Blind. Sept., 1957. 51:7:278-315.

Contents: Introduction, Alexander F. Handel. - Sheltered workshops; past and present, Edward L. Chouinard. - Vocational rehabilitation of the blind, Abraham Jacobs. - The sheltered workshop; a challenge to social welfare, Bertram J. Black. - Planning sheltered employment services at the community level, Gordon W. Allen. - The industrial workshop; destination unlimited, Carl E. Olsen and Marian Held. - Vermont Pilot Study on Industrial Homework, M. Roberta Townsend.

Mr. Chouinard's article traces the evolution of the sheltered workshop and the trend toward rehabilitation in present-day workshops for the blind, as well as in workshops for the handicapped of all types. Dr. Jacobs' article is from a monograph he is preparing for the American Foundation for the Blind. The two articles by Mr. Black and Mr. Allen were prepared for the annual forum of the National Conference on Social Welfare. The article on the Vermont Pilot Study was adapted from a report to the annual meeting of National Industries for the Blind.

See also 1243; 1274.

SHELTERED WORKSHOPS--OHIO

1339. Highland View Cuyahoga County Hospital, Cleveland (Harvard Rd., Cleveland 22, Ohio)

An investigation into the vocational potentials of hospitalized patients with chronic disabilities; third semi-annual progress report (January, 1957-June, 1957). Cleveland, Ohio, The Hospital, 1957. 37 p. (Special grant 21-56) Mimeo.

The Highland Shop research project, a five-year investigation to determine the degree to which and the conditions under which severely disabled chronically ill patients can be vocationally productive within the sheltered workshop setting, is supported mainly by the U.S. Office of Vocational Rehabilitation under its special grants program. The present report is the third of a scheduled series describing progress of the project. Discussed are: the current shop organization; research conducted on securing contracts, shop production and results of business operations; the services provided clients in the vocational training program; research in client work capacities; and research in professional training (occupational therapist training and rehabilitation counselor training programs). Findings, conclusions, hypotheses, and prospects for the future are reported. In order to acquaint other workers in the field with findings and methods evolved in this project, it is hoped that a prevocational evaluation institute, tentatively planned for next spring, will become a reality.

SOCIAL SERVICE--ADMINISTRATION

1340. Shapiro, Harvey L. (Beth Israel Hosp., 330 Brookline Ave., Boston 15, Mass.)

How to develop and use program policy and procedure manuals; a program director's guide. Am. J. Public Health. Aug., 1957. 47:8:975-982. Reprint.

An explanation of the usefulness and necessity for written program policy and procedure statements and the methods employed in formulating policies and procedures for medical service programs. Use of policy and procedure manuals in projective program planning can be especially useful. Periodic review and modification of programs are accomplished with minimal upset and maximal staff cooperation if the framework is developed in written form along the lines suggested here. Two sample forms for case selection policy and procedure are illustrated. Mr. Shapiro formerly served as regional administrative methods consultant to the U.S. Children's Bureau.

SPECIAL EDUCATION

1341. Boykin, Leander L. (Southern Univ., Baton Rouge, La.)

Who is the exceptional child? Elementary School J. Oct., 1957. 58: 1:42-47.

Briefly discusses 8 groups of children who are termed "exceptional"--the mentally deficient and educationally retarded, the socially and emotionally handicapped, the gifted, the nutritionally handicapped, the acoustically and visually handicapped, the speech defective, and the orthopedically handicapped, the epileptic, the cardiopathic, the tubercular, and the child with glandular disorders. The author stresses, however, that the exceptional child is a child first, with all the needs of the "normal" and with equal rights to educational opportunities suited to his needs.

SPECIAL EDUCATION--STATISTICS

See 1267.

SPECIAL EDUCATION--SURVEYS--MARYLAND

1342. Maryland. State Board of Education (2 W. Redwood St., Baltimore 1, Md.)

Special education of atypical children in Maryland; report of the committee appointed by the.... Baltimore, The Board, 1956. 58 p.

Purpose of the survey was to identify the atypical child, to determine the present provisions for special education, and to make recommendations for changes or additions to existing programs. This final report is a summary of preliminary reports of 7 subcommittees covering the classifications of atypicality. The report covers an outline of the categories of includable atypicality (for the purpose of special education), tables of estimated prevalence and the formulas used in compiling them, a summary of existing special education programs for the year 1954-55, and general recommendations and principles to be applied in planning special education programs. Specific recommendations for application in each field of atypicality are also included.

SPEECH CORRECTION

1343. Arnold, Godfrey E. (987 Fifth Ave., New York 21, N.Y.)

Vocal rehabilitation of paralytic dysphonia: III. Present concepts of laryngeal paralysis. A. M. A. Arch. Otolaryngology. Apr., 1957. 65:4: 317-336. Reprint.

An analysis of an extensive and representative bibliography of the subject is made in order to attempt to define the major problems of laryngeal paralysis. Discussed are: value and limitations of animal experimentation; chronological changes in the concepts of laryngeal paralysis; central pathways and the peripheral course of laryngeal nerves; distribution of vagal and accessory fibers in laryngeal nerves; variability of the terminal ramification of the recurrent nerves; and present interpretation of the position of the paralyzed vocal cords. Bibliography, p. 330-336. Part I of this series, titled "...Cartilage injection into a paralyzed vocal cord," appeared in A. M. A. Arch. Otolaryngol., 1955. 62:1:1-17, Part II, "...Acoustic analysis of vocal function," A. M. A. Arch. Otolaryngol., 1955. 62:6:593-601.

1344. Fabricant, Noah D. (185 N. Wabash, Chicago 1, Ill.)

Speech defects due to oral deformities. Eye, Ear, Nose & Throat Month. Sept., 1957. 36:9:535.

A variety of oral deformities affect articulation; in the case of speech defects from these causes, orthodontia is important in the correction of coexistent speech defects. Speech training may also be necessary, once the dental appliances have been removed. For cleft lip, early operation is advised; in facial paralysis, speaking in front of a mirror is often an aid in correction. When elements of cause and effect are fully understood, an effective program of speech rehabilitation may be planned with expectation of successful correction.

SPEECH CORRECTION (continued)

1345. Greene, Margaret C. L. (Royal Buckinghamshire and Associated Hosps., Aylesbury, Buckinghamshire, England.)

Speech of children before and after removal of tonsils and adenoids. J. Speech and Hear. Disorders. Sept., 1957. 22:3:361-370.

A report of a speech survey of 377 unselected cases in a consecutive series for whom removal of tonsils and adenoids, or adenoids alone, was recommended. Following surgery a total of 158 children were reviewed because their speech or behavior warranted further examination or whose speech was nasal after operation. Purpose of the study was to determine whether articulation was affected by the removal of tonsils and whether a speech therapist is ever justified in recommending tonsilectomy where tonsils are enlarged and articulation defective. A high incidence of articulation defects indicates enlarged tonsils may contribute to articulation difficulties. In this series recovery of normal speech was rapid except in 4 children with emotional problems. After surgery hearing improved in all cases of catarrhal deafness. Trauma from hospitalization was noted in only a few children.

SPLINTS

1346. Nelson, K. B. (Nelson Orthopedic Co., Pittsburgh, Pa.)

Hand swivel; an attachment for the paralyzed hand. Orthopedic & Prosthetic Appliance J. Sept., 1957. 11:3:53-55.

This attachment is made with an opening in which any one of a variety of aids can be inserted for use in performing activities of daily living. The Swivel is especially helpful in that it allows the patient to take care of himself for a considerable period of time without the aid of an attendant. The Hand Swivel was demonstrated with attachments at the Geneva Conference on Poliomyelitis and has been well received wherever it has been shown.

SPORTS

1347. Jokl, Ernst (Ky. Rehabilitation Center, Univ. of Kentucky, Lexington, Ky.)

Neurological case histories of two Olympic champions. J. Am. Med. Assn. Sept., 14, 1957. 165:2:129-131. Reprint.

Presents case histories of Harold V. Connolly, world record holder in hammer throwing, and Karoly Takacs, member of the Hungarian team in the pistol shooting competition. Connolly is afflicted with a combined upper and lower left brachial plexus paralysis; Takacs is an upper extremity amputee who continued pistol shooting with his left hand after amputation of the right arm. Both cases illustrate the scope of compensatory adjustment of the nervous system. In Takacs' case, the extent to which an established neuromotor pattern can be projected into previously untrained skeleto-muscular regions is demonstrated. The possibility of complete functional rehabilitation after major disablement is well illustrated here.

STATE SERVICES--ADMINISTRATION

See 1340.

VETERANS (DISABLED)--PROGRAMS

1348. U. S. Veterans Administration. Department of Medicine and Surgery (Washington 25, D.C.)

Planning (for long-term patients in hospitals). Information Bul. Aug. 30, 1957. 24 p. illus., tabs. (IB 10-110)

Contents: Program for the long-term patient. -A statistical study of certain V.A. patients requiring long-term medical care as of April 17, 1957, H. J. Doben and Mrs. E. M. Corzine. -Geriatrics; treatment, research, rehabilitation, Lee D. Cady and Lewis A. Leavitt. -The classification and management of patients with long-term illness, A. Tomasulo, Leo Rosenberg, and Walter C. Matheny.

A bulletin developed for V.A. hospital management and staff personnel to provide suggestions for meeting the needs of their long-term patients. It is not a detailed program guide but discusses aspects of care and treatment and the basic requirements for a successful program for this group of patients.

VOCATIONAL EDUCATION--GREAT BRITAIN

1349. Eccles, Evelyn

The work of the Preparatory Training Bureau of the British Council for Rehabilitation. Almoner. Sept., 1957. 10:6:205-207.

Describes services to hospitalized or homebound patients through correspondence courses or personal tutoring, provided by the Preparatory Training Bureau of the British Council for Rehabilitation with the help of volunteers and local committees. Although the primary aim of the program is to encourage preliminary training in preparation for vocational training provided by the Ministry of Labor, it has great therapeutic value for those patients who are never able to make practical use of the training.

VOCATIONAL GUIDANCE

1350. McCully, C. Harold (239 Beachwood Rd., Ridgewood, N.J.)

Developments of a decade of VA counseling. Personnel and Guidance J. Sept., 1957. 37:1:21-27.

The counseling program of the Veterans Administration, without precedent in the field of counseling and guidance because of the size, geographical distribution, and diverse characteristics of the population served, is also unique in that it reflected a new departure in national policy. Legislature upon which the program was based recognized overtly the potential contribution of the counseling function in the educational and vocational adjustment of adults. Brief background information on the program and developments within the program since its initiation are discussed. Major developments have been in the direction of increased professionalization of the service and to some degree reflect advances made in counseling and counseling psychology during the same period.

VOCATIONAL GUIDANCE (continued)

1351. Yerkes, Wanda (Zeb Vance School, Charlotte City Schools, Charlotte, N.C.)

Vocational planning in the public schools for the hard of hearing. Exceptional Children. Sept., 1957. 24:1:6-9, 15.

Proper training and guidance in public schools could help to insure the future vocational adjustment of the hard of hearing. Such training should include, at the prevocational level, special education in communication skills, correct fitting and adjustment of the hearing aid and auditory training in its use, speech therapy, social and emotional guidance. Counseling pupils on the limitations of their particular type of loss, on realistic attitudes toward a vocation in the light of the handicap, and providing pupils with academic and vocational training necessary to qualify for a job are vital parts of any such program. Includes a short bibliography on hearing problems in school children and on counseling the hard of hearing.

VOCATIONAL GUIDANCE--ILLINOIS

1352. Gellman, William (Jewish Vocational Center, 231 S. Wells St., Chicago 3, Ill.)

Vocational evaluation of the emotionally handicapped. J. Rehab. July-Aug., 1957. 23:4:9-10, 13, 32.

A preliminary report of a vocational evaluation program for the emotionally handicapped, a project developed in the Vocational Adjustment and Evaluation Center, a workshop conducted by the Jewish Vocational Service of Chicago. The workshop is built upon the use of a true work situation and the components of the work environment are manipulated to determine their effect on workshop behavior. Methods employed and results of the workshop's operation over the past year and a half are discussed.

VOLUNTARY HEALTH AGENCIES

See 1361.

WORKMEN'S COMPENSATION

1353. International Association of Industrial Accident Boards and Commissions

Workmen's compensation problems, 1956; proceedings, 42nd annual convention of the... December 2-6, 1956. Washington, D.C., U.S. Bur. of Labor Standards, 1957. 317 p. tabs. (Bul. no. 192)

Contains committee reports, panel discussions, and special addresses delivered at the annual convention; all are concerned with various aspects of workmen's compensation--medical, legal, and rehabilitation. A partial listing of contents indicates articles of special interest to those in the rehabilitation field: Myth and reality in workmen's compensation, Herman M. Somers, p. 18. -The compensation claimant in rehabilitation, Willis C. Gorthy, p. 204. -Report of the Rehabilitation Committee, p. 205. -The insurer's role in rehabilitation, Richard B. Cooper, p. 227. -The expanding Federal-State Vocational Rehabilitation program, D. H. Dabelstein, p. 235. -The panel on: Workmen's compensation claimants with low back pain, p. 272. Two other panel discussions on the medical and legal aspects of workmen's compensation in heart cases are included.

Copies of the proceedings are available from U.S. Superintendent of Documents, Washington 25, D.C., at \$1.00 a copy.

New Books Reviewed

CEREBRAL PALSY

1354. Collis, Irene

The infantile cerebral palsies, by Irene Collis (and others). Springfield, Ill., Charles C Thomas, Publ., 1957. 100 p. tabs.

The American edition of a book published originally in England in 1956 (see Rehabilitation Literature, Apr., 1957, #546), it is the work of a group of English physicians who are devoting their study to the clinical problems of diagnosis, prognosis, management, and the administrative work involved in training medical and other professional personnel in the field of cerebral palsy. This edition is available from Charles C Thomas, Publisher, 301-327 E. Lawrence Ave., Springfield, Ill., at \$3.00 a copy.

CHILDREN--GROWTH AND DEVELOPMENT

1355. Macy, Icie G.

Chemical anthropology; a new approach to growth in children, by Icie G. Macy and Harriet J. Kelly. Chicago, Univ. of Chicago Pr., 1957. 149 p. figs., tabs.

A summary of the results of specific phases of research on the fundamental aspects of chemical growth and nutrition of children, sponsored by the Children's Fund of Michigan and the Merrill-Palmer School. The book is concerned with the phenomenon of human growth in children, from 4 to 12 years of age, inclusive, and the integration and interaction of physiochemical growth in the normal child's development. A detailed analysis of interrelated physical, biochemical, and metabolic processes, their assessments, and how they are applied to evaluate and predict trends in body composition in living children opens up new avenues of thought in the study of child care and development. Representing the combined efforts of pediatricians, anatomists, roentgenologists, biochemists, nutritionists, and statisticians, this longitudinal study of a small group of children over a period of years provides authoritative data and experiences.

Published by University of Chicago Press, 5750 Ellis Ave., Chicago 37, Ill., at \$3.75 a copy.

DEAF--SPECIAL EDUCATION

1356. Ewing, A. W. G., ed.

Educational guidance and the deaf child. Washington, D.C., Volta Bureau (1957). 345 p. tabs., graphs.

A representative collection of the results of research programs conducted at the Department of Education of the Deaf, University of Manchester, England; all the investigations reported here were completed in the period from 1952 through 1956. They constitute the second stage in the research program begun by Professor Ewing and Mrs. Ewing in 1927. Included are studies on acoustics and its relation to hearing aids; the design and construction of schools for the deaf;

DEAF--SPECIAL EDUCATION (continued)

assessment of abilities and mental tests for deaf children; and detection of deafness in children of various ages. Dr. Irene Ewing describes tests they have developed for evaluating the hearing of babies and young children; this is the first time the description has appeared in print. Test results and work in the guidance clinics for preschool deaf children are also discussed. The book will be of interest especially to medical personnel, school administrators and teachers since the implications of the research point out the urgent need to improve not only the physical plant of the school for the deaf but to consider also the psychological and educational issues involved. Evidence given in this book indicates that children with hearing losses as high as 95 decibels (and, in some cases, even higher) can be helped by using hearing aids, especially when use of the aid is begun systematically as a part of home training before the deaf child reaches the age of 3 years.

Distributed in the U.S. by the Volta Bureau, 1537 37th St., N.W., Washington 7, D.C., at \$6.12 a copy.

HEALTH SERVICES--SURVEYS--MASSACHUSETTS

1357. United Community Services of Metropolitan Boston (14 Somerset St., Boston, Mass.)

Medical care needs and services in the Boston Metropolitan area, by Leonard S. Rosenfeld, Jacob Katz, and Avedis Donabedian. Boston, The Services, 1957. 147 p. tabs. (Medical care evaluation studies) Mimeo.

A report of a household survey, made in the Metropolitan Boston area, of reported symptoms of possible disease, an investigation supported partially by a research grant from the National Institutes of Health. Results of the survey are analyzed according to the relation of treated and untreated symptoms to various factors, such as prepayment coverage, disability experience, attitudes, and socio-economic characteristics of families. The study is one of several designed to develop methods for evaluating the effects of community organization of medical care on the adequacy and efficiency of health services. Data in this report indicate the socio-economic distribution of unmet needs and related health indices and test the degree to which socio-economic characteristics of census tracts can be substituted for family characteristics in studying community needs.

MENTAL DEFECTIVES

1358. Kansas State Training School, Winfield

First Winfield Institute: Research in the management of the mentally retarded child, October 8, 9, 10, 1956; edited by M. Erik Wright and Hugh T. Croley. Winfield, The School (1957). 242 p. tabs. Plano-graphed. Paperbound.

The proceedings of the Institute include all of the papers and most of the ensuing discussions presented. The professional staff and consultants of the Winfield State Training School consider the management of the mentally retarded, especially the moderately-to-severely retarded, as a long-range program involving not only the child, his parents, and the training

MENTAL DEFECTIVES (continued)

school but the local and larger social community as well. It is their belief that the training school should offer more than a custodial environment; it should develop an active treatment program with the aim of rehabilitation and social re-integration within the limits of the individual child.

Contents: Psychological and cultural factors in the etiology of mental retardation, Seymour B. Sarason. - Medical factors in diagnosis contributing to management and treatment programs, Lauretta Bender. - Research in management of the mentally retarded from a parent's point of view, Kenneth Razak. - The impact of mental retardation on the family, Harriet E. Blodgett. - The community responsibility for the care of the mentally retarded, Herman Yannet. - An experiment in local community management of the mentally retarded, Harriet E. Blodgett. - A state program based on parent, county and state cooperation, Mildred Thomason. - Biological treatment of mental retardation, Sol Nichtern. - Intensive educational treatment: The training potential of brain-injured mentally retarded children, James J. Gallagher. - Public school and institutional training programs for severely retarded children, G. Orville Johnson. - A day class program for the severely retarded child; a preliminary report, John V. Hottell. - The prediction of the adult status of high grade mental retardates, Maynard G. Reynolds. - Prediction of post-institutional vocational placement achievement, Albert J. Shafter. - Planning postgraduate training in mental retardation for the physician and allied professional workers, Herman Yannet. - Frontiers of research in the management of the mentally retarded (a panel discussion). - Winfield State Training School: A brief institutional "case study," John B. Smith.

ORTHOPEDICS

1359. Hampton, Oscar P.

Orthopedic surgery in the Mediterranean theater of operations....
Washington, D.C., Off. of the Surgeon General, Dept. of the Army, 1957.
368 p. illus., tabs. (Surgery in World War II)

Described as a "reasonably complete and comprehensive record of the experience in orthopedic surgery in the Mediterranean Theater of Operations it reflects changes in both concepts and methods of orthopedic surgery. These are described in detail; administrative aspects of the service are discussed. In addition to thorough descriptions of the medical management of combat wounds and fractures, a chapter is included on noncombat orthopedic lesions of which painful feet, backs, painful and unstable knees, recurrent dislocations of the shoulder, and old fractures of the carpal scaphoid bone comprised the majority. General practices and policies and recommendations issued to personnel on the administration of services to the wounded provide a wealth of information on orthopedic management in war conditions. Data from numerous surveys which have been analyzed add immeasurably to the comprehensiveness of the text.

Available from U.S. Superintendent of Documents, Washington 25, D.C., at \$4.00 a copy.

PARAPLEGIA--BIOGRAPHY

1360. Schoenberner, Franz

You still have your head; excursions from immobility. New York, Macmillan Co., 1957. 247 p.

Late one night in November, 1951 Mr. Schoenberner was disturbed from his writing by the loud radio in the neighboring apartment. When he remonstrated, he was struck so savagely that he fell senseless and his spinal cord was broken. As an anti-Nazi, he had fled Munich in 1933 from his post as editor of the satirical-political weekly Simplicissimus, sought refuge in Switzerland and France (where he was interned when the Germans came), and finally in June 1941 arrived in the United States. As a rationalist, he could reflect on the meaning of a personal act of irrational violence only as a natural event in a world of violence. For 18 weeks the author had occasion to reflect on this question and other topics as he lay immobile on a hospital bed in New York City. These are the contents of his book: introspective discourses on American kindness and anti-intellectualism; the Book of Job; the human genius of Heine, Freud, and Helen Keller; religion and prudery; and other aspects of integrity and folly in man. Although Mr. Schoenberner at the age of 59 joined the society of American quadriplegics, he retains his minority status as a courageous intellectual and humanist of the liberal European tradition.

Published by the Macmillan Co., 60 Fifth Ave., New York 11, N.Y., at \$4.00 a copy.

VOLUNTARY HEALTH AGENCIES

1361. Shryock, Richard Harrison

National Tuberculosis Association, 1904-1954; a study of the voluntary health movement in the United States. New York, Natl. Tuberculosis Assn., 1957. 342 p. illus. (Historical ser. no. 8)

By requesting this study of the National Tuberculosis Association's founding and half-century of activities against tuberculosis, the Association has made a notable contribution to better understanding of the voluntary health field, the philosophy of voluntary health agencies, and the medical, public health, and social background of an era which has recorded great progress in public health. Because the Association was the pioneer among voluntary national societies, its evolution illustrates the multitude of complex problems involved in the administration of such organizations. Dr. Shryock, Welch Professor of the History of Medicine at Johns Hopkins University, brings to life the personalities of the founders and leaders in the Association in a manner calculated to hold the reader's interest to the last page. This book should be required reading and an enjoyable experience for all those interested in public health services.

Published by National Tuberculosis Association, 1790 Broadway, New York 19, N.Y., at \$3.00 a copy.

REVIEW ARTICLE

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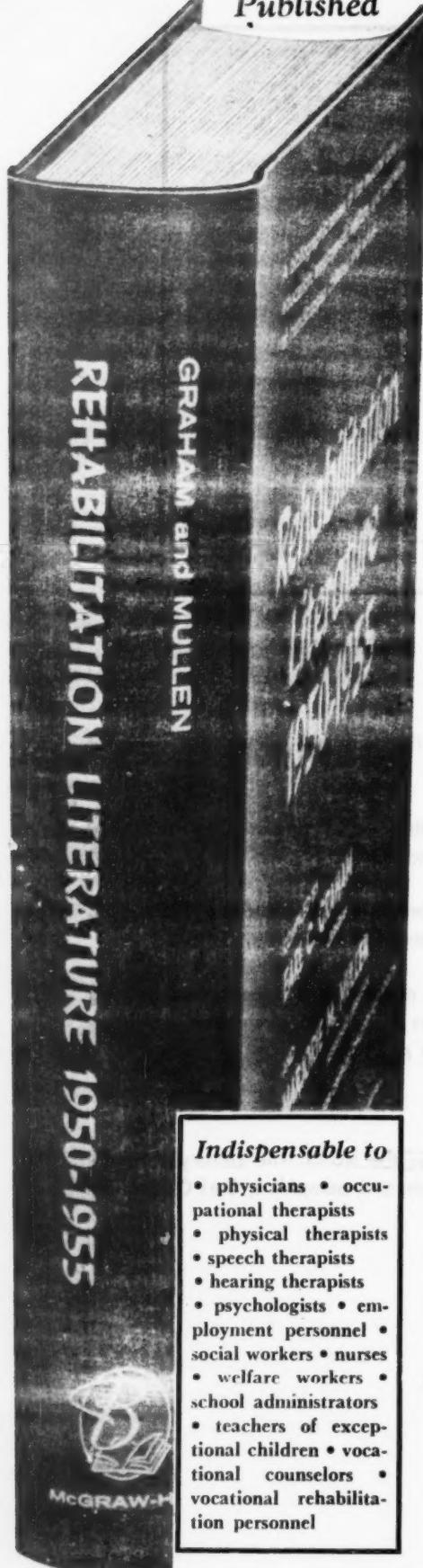
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